MMIC/COHV INDUSTRY PARTNER APPLICATION



2019 Application



COMPANY INFORMATION	Office Use: Date received
Same information as on 2018 application Information has changed (please continue to "Method of Payment") (please complete "Compa	
Company Name:	
Main Contact:	
Title:	
Address:	
City: Prov/St.	Country:
Postal Code/Zip:	
Tel:	
E-mail: Company Website:	
Type of Business: (check all that apply) Aftermarket Distributor/Manufacturer Publication Services to Industry / Consumer Insurance / Finance Other:	
METHOD OF PAYMENT 2019 Industry Partner fee: \$1,000 + \$130 HST (13%) = \$1,130	
☐ Cheque is enclosed with this application (pay to the order of: MMIC) ☐ I want to pay by credit card: ☐ VISA ☐ Mastercard	
The state of the s	
Card No: Expiry: Name on card: Signature:	
Please e-mail, fax or mail the completed application with the contact information below:	
Oksana Buhel, Industry Partner Services	
3000 Steeles Ave., E, Suite 201 Markham, ON L3R 4T9	
Tel: 416 491-4449 Fax: 416-493-1985 Toll-free: 1-877-470-2288	
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E-mail: obuhel@mmic.ca