



## AFFILIATE MEMBERSHIP APPLICATION

Join as a member and in return you'll gain access to a wide range of safety training, consulting, and other services. The membership fee is based on the salaries you reported to the WCB last year.

Please complete this form and return to: [safety@sasm.ca](mailto:safety@sasm.ca)

<b>Name of Organization:</b>		<b>Company Website:</b>
<b>Physical Address:</b>		
<b>Mailing Address:</b> (if different than above)		
<b><u>Business Contact</u></b>		
<b>Name:</b>	<b>Email:</b>	<b>Phone:</b>
<b><u>Safety Contact</u></b>		
<b>Name:</b>	<b>Email:</b>	<b>Phone:</b>
<b># of Employees:</b>	<b>WCB Rate code:</b>	<b>WCB Firm number:</b>
<p><b>Membership Benefits</b></p> <ul style="list-style-type: none"> <li>• All regional classroom training (in-person and webinar) at no charge</li> <li>• All online training at no charge</li> <li>• CoR Audits at no charge</li> <li>• Use of SASM's Training Management System (TMS) database at no charge</li> <li>• Gap Analysis at no charge</li> <li>• EH&amp;S Analytics at no charge</li> </ul>		
<b>PLEASE COMPLETE THE FOLLOWING INFORMATION</b>		
<b>Membership fee - \$0.21/\$100 of salary</b>		
<b>Total salaries reported to the WCB last year</b>		\$
x .0021		\$
plus 5% GST		\$
<b>Total</b>		\$
<p><b>Memberships received during the year will be prorated to January 1<sup>st</sup> of the current year</b></p> <p><b>An invoice will be produced and emailed to the business contact.</b></p> <p><b>Cheques, Visa and Mastercard accepted.</b></p>		
<b>Name and Position (print):</b>	<b>Signature of Applicant:</b>	
<b>Date:</b>	<b>return to: <a href="mailto:safety@sasm.ca">safety@sasm.ca</a></b>	