



CUSTOMER MEMBER APPLICATION

Customer: Any corporation or government agency that is a **consumer of helicopter air services** who has satisfied the requirements for admission and has paid the dues established by the Board.

Please view the link below to determine the Applicable Application Form Categories - http://www.h-a-c.ca/Members_Rights_Responsibilities.pdf

Organization Name: _____

Primary Product/Service: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip Code: _____

Web: _____

Name of HAC Contact Representative: _____ Position Title: _____

Email of HAC Contact Representative: _____ Phone: _____

Signature of Primary Contact Representative: _____

Accounting Department Email: _____

Accounting Department Telephone # : _____ Date: _____

Customer Dues Fiscal Year September 1 – August 31st

Basic Annual Dues.....\$682.00 CAD

Applicable taxes will be applied based on your region. This does not apply to companies located outside of Canada. *

Please submit application to chanel.barnes@h-a-c.ca
Your application will be reviewed, and an invoice issued.
PLEASE DO NOT EMAIL OR FAX CREDIT CARD DETAILS