Canadian Mathematical Society
Société mathématique du Canada

2027 *CORPORATE Membership Application/Renewal Form*

Membership period: January 1 to December 31

MEMBER INFORMATION

MANDATORY FIELDS*

NAME OF COMPANY*			PREFERRED LANGUAGE: ENGLISH ☐ FRENCH ☐
ADDRESS*			
CITY*	PROVINCE/STATE*	COUNTRY*	POSTAL CODE/ZIP CODE*
PHONE NUMBER*		FAX	
EMAIL*		HOME PAGE	
INDUSTRY TYPE			

COMPANY REPRESENTATIVE

NAME		TITLE
TELEPHONE*	FAX	EMAIL
ALTERNATE NAME		TITLE
TELEPHONE	FAX	EMAIL

	Canadian and International Addresses (CDN $)
2027 CORPORATE RATE	$635.00

PAYMENT INFORMATION

RATE IS SUBJECT TO CHANGE.

Payment Method	Credit card: Visa ☐ MasterCard ☐	Cheque: Cheque number _____
Credit card number	____/____/____/____	Expiry ____/____
Printed name on card		
Signature		

NON-CANADIAN ADDRESSES PAY IN US FUNDS. CHEQUES DRAWN ON CANADIAN OR US BANK. BANK ADDRESS MUST APPEAR ON CHEQUE. CHEQUES ARE PAYABLE TO THE CANADIAN MATHEMATICAL SOCIETY – PAYMENT MUST ACCOMPANY FORM

GST/HST# 11883 3979 RT

OFFICE USE ONLY

Please mail or email to: 616 Cooper Street, Ottawa, ON CANADA K1R 5J2 T: 613-733-2662; E: memberships@cms.math.ca