



ALLIANCE OF BEVERAGE LICENSEES  
FOR A RESPONSIBLE LIQUOR INDUSTRY

**Application for Associate Membership**

Membership year: September 1, 2011 to August 31, 2012

Company Name: \_\_\_\_\_

Brief Description: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ PC: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Fax: \_\_\_\_\_

email: \_\_\_\_\_ website: \_\_\_\_\_

**Membership Fees**

Associate Membership Fee = \$325 + \$39 (12% HST)	=	<b>\$ 364.00</b>
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HST # 86207 1305 RP0001

**Payment Information**


 
 Cheque
 *(Please make Cheques payable to: Alliance of Beverage Licensees)*

Credit Card Number:  Expiry Date:  /

Name on Card:

Cardholder's Signature: \_\_\_\_\_

**Billing Information**

Please email me my receipt:
  Same as above

*email address*

Please fax completed form to: 604-688-8560  
OR mail to ABLE Office: 200 - 948 Howe Street, Vancouver, BC V6Z 1N9

*Thank you for your support*

*Please note applications for membership shall be promptly considered and the credentials ruled upon by the Board of Directors*