



ALLIANCE OF BEVERAGE LICENSEES  
FOR A RESPONSIBLE LIQUOR INDUSTRY

**Application for Associate Membership  
September 1, 2009—August 31, 2010**

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 + \$16.25 (5%) GST = \$ 341.25**

GST # 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*