



NIAGARA
CONSTRUCTION
ASSOCIATION

BUILDING Support and Service
for our Members

34 Scott Street West
St. Catharines, ON L2R 1C9
905-682-6661
office@niagaraconstruction.org
www.niagaraconstruction.org

2025 PROFESSIONAL APPLICATION

BUSINESS INFORMATION

COMPANY CONTACT INFORMATION:

Company Name:	Date Commenced:	
Company Contact:	Position:	
Phone:	Fax:	
Email:	Website:	
Street Address:	Suite/Unit:	P.O. Box:
City:	Province:	Postal Code:

INDUSTRY SPECIFIC COMPANY CONTACTS:

ACCOUNTING CONTACT

Contact Name:	Email:
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HEALTH & SAFETY CONTACT

Contact Name:	Email:
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TRAINING/EDUCATION/HR CONTACT

Contact Name:	Email:
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YOUNG LEADER (under 40's) CONTACT

Contact Name:	Email:
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WOMEN IN CONSTRUCTION CONTACT

Contact Name:	Email:
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MARKETING/SPONSORSHIP/EVENTS CONTACT

Contact Name:	Email:
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PROJECT/TENDER CONTACT

Contact Name:	Email:
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REFERENCE (Bank, Supplier, etc.)

Company:	Name:	Phone:
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ANNUAL MEMBERSHIP FEE

STARTING QUARTER	PROFESSIONAL MEMBERSHIP	UPGRADE MEMBERSHIP & SAVE! Access to the Electronic Plans Room (EPR) is \$400 when sold separately
*Pro-rated fees calculated when you join	*Renewals are invoiced annually, due Jan. 31 st	
January - March	\$509 + HST (Full Year Membership)	\$859 + HST
April - June	\$382 + HST	\$645 + HST
July - September	\$254.50 + HST	\$430 + HST
October - December	\$127.25 + HST	\$215 + HST

PAYMENT INFORMATION

Card Holder Name:	Signature:
Visa/MasterCard/AMEX #:	Security Code: Expiry Date:

*I, the undersigned, hereby make an application for membership in NIAGARA CONSTRUCTION ASSOCIATION, with all rights and privileges thereto. I agree to the Charter, By-Laws and Regulations thereof in force from time to time.

Signature of Applicant:	Date:
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