



PROFESSIONAL-IN-TRANSITION MEMBERSHIP APPLICATION

MEMBER INFORMATION

Name:		
Address:		
City:	Province:	Postal Code:
Phone:	Cell Phone:	E-mail:

APPLICATION WILL BE SPONSORED BY:

- Current CSUR Main Member Contact **OR**
- Current CSUR Director **OR**
- Letter of Reference from Latest Employer **OR**
- Endorsement by a CSUR Officer

SPONSOR'S CONTACT INFORMATION

Name:		
Title:	Company:	
Phone:	E-mail:	Fax:

ANNUAL MEMBERSHIP FEES

MEMBERSHIP CATEGORY: PROFESSIONAL-IN-TRANSITION	FEE: \$99.00	Please Note: <ul style="list-style-type: none"> ▪ Professional-in-Transition Membership is a one-time payment. ▪ This membership will expire December 31, 2018. ▪ If this member secures employment (full-time or contract of 6 months or greater), the membership is terminated without any reimbursement of dues. ▪ This member can serve as an advisor or committee volunteer. Fee is CDN\$ before 5% GST and 3.25% Credit Card Fee
<i>I WAS EMPLOYED REGULARLY IN THE ENERGY INDUSTRY WITHIN THE LAST 2 YEARS</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	

PAYMENT OPTIONS

Credit Card:	VISA <input type="checkbox"/>	MASTERCARD <input type="checkbox"/>	AMERICAN EXPRESS <input type="checkbox"/>
Name on Card:			
Card Number:	Expiry Date:	Dollar Amount to Be Charged (Fee plus GST): \$_____	

Signature: _____

CHEQUE ENCLOSED

SMALL PRINT

- This membership begins at the time of CSUR confirmation of sponsorship and continues to December 31, 2018.
- There are no voting rights associated with this membership category.
- This category is not allowed to serve as a director or officer of the society.
- Completion of this form constitutes permission to list your name on our online member list.

SIGNATURE

I authorize the verification of my credit and information as provided on this form. In addition, I authorized CSUR to contact me via the email address also provided on this form.

Applicant Name (PRINT):	Date:
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Signature of Applicant: _____

SUBMIT application to the attention of MEMBERSHIP

Canadian Society for Unconventional Resources
736 - 8 Avenue SW, Suite 500, Calgary AB, T2P 1H4
EMAIL: info@csur.com FAX: 403-233-9267

