



National Member Application

APPLICANT INFORMATION

Company Name							
Last Name			First		Title		
Mailing Address					Apartment/Unit #		
City		Province		Postal Code		Phone	
E-mail Address						(office use) file #	

CODE OF ETHICS:

As a Member, I/we will strive to recognize, promote, and improve lesbian, gay, bisexual, trans-identified (LGBT) supportive businesses and the LGBT supportive business community wherever possible. To that end, I/we agree to be honour-bound by these Standards of Business Conduct and Ethics:

- A member will conduct business with honesty, integrity and fairness with respect to customers, clients and employees alike.
- A member will be accessible and accountable to customers or clients, and make every reasonable effort to act for the customers' or clients' best interest and benefit.
- A member will not discriminate based on race, colour, creed, religion, national origin, age, disability, marital status, gender, gender identity or sexual orientation.
- A member will be responsible at all times for truthful and non-deceptive advertising and promotion regarding their business and its products or services.
- A member will conduct business with strict adherence to the laws of their respective city/province of business, and to business or professional codes existent for the particular business or profession, and in accordance with generally accepted business practices.
- A member will support the ideals and goals of this organization, as well as support the LGBT community in general, in a constructive and positive manner.

In addition to the CGLCC newsletter, do you wish to receive information from CGLCC affiliates, sponsors, and suppliers? YES NO

EMPLOYER INFORMATION

Industry/ Sector		Does your organization have an LGBT Employee Resource Group (ERG)? <input type="checkbox"/> YES <input type="checkbox"/> NO		Name of your ERG.	
Type of business/description					
Do you wish your company/business name and title to be listed on your profile? YES <input type="checkbox"/> NO <input type="checkbox"/>				If additional space is required please attach info on separate page and mark page 2 of 2 and applicant name at top.	

DISCLAIMER AND SIGNATURE

Please register me as a member as outlined below at the applicable rate plus GST/HST as designated:

- National Active Member (voting):**
- | | |
|--|---|
| <input type="checkbox"/> Individual \$500 | <input type="checkbox"/> Small Business (< 100 employees) \$750 |
| <input type="checkbox"/> 100 - 5,000 employees \$1,000 | <input type="checkbox"/> 5-10,000 employees \$1,500 |
| <input type="checkbox"/> 10-20,000 employees \$2,500 | <input type="checkbox"/> 20-30,000 employees \$5,000 |
| <input type="checkbox"/> 30-40,000 employees \$7,500 | <input type="checkbox"/> +40,000 employees \$10,000 |
- National Associate Member (non-voting) \$250**

Annual dues are applicable for one year. The membership year extends to the last day of the 12th month following acceptance date.

NOTE: If you are a member of a CGLCC affiliate organization you may already be a Regional Associate Member (non-voting) of the CGLCC. If you are a member of a CGLCC affiliate organization, you qualify for a \$50 discount on the National Active Membership. Please complete item below.

I am a member of _____, a CGLCC affiliate organization; please apply a \$50.00 discount to National Active Membership.

I certify that the information provided is true and complete to the best of my knowledge. I hereby submit this application for membership, and if accepted, will agree to abide by the code of ethics of the organization and support its objectives.

<input type="checkbox"/> Invoice or <input type="checkbox"/> Visa/MC #	Exp.
Statement Address	City/Prov/PC
Signature	Date

Upon completion and signature, please submit by Fax 416.761.6161 or scan and E-mail to office@cglcc.ca or mail to CGLCC, 39 River Street, Toronto, Ontario, M5A 3P1 CANADA