

Associate

Membership Fees 2024

Company Name: ____

Associate membership is open to:

Individual, partnership, corporation, firm, association or other business entity closely allied with the animal feed industry and/or supplying a service or product to the animal feed industry, and without limitation shall include the following:

division.

- Industry Support Services (including Consultants)
- Industry Supplies (such as Bags, Machinery)
- Industry Associations

Identify your company's sales volume (including internal sales) and then write the corresponding National Membership Fee below.

\$ Sales	
< \$ 15M	\$1,400
\$15M - < \$25M	\$3,000
\$25M or more	\$4000

In order to join ANAC, your organization must be a member of at least one

Table B—Provincial Fees For each applicable province, identify the fees owing, and write the total of all Provincial Membership fees below.

Province	Fee Amounts	Fees Owing
Atlantic	\$125	
British Columbia	\$225	
Manitoba	\$125	
Western (WFIA)	\$700	
Total Provincial Fees		

National Membership Fee (Determine the correct amount from Ta	ble A)	
Provincial Membership Fees - (Determination amount from Table B) - Note: Ontario &		
	GST/HST	
	Amount Owing	

Signature: _____ Print name: _____

Date:

Animal Nutrition Association of Canada



Membership Application

Company:	
Address:	
Telephone:	Fax:
Email:	
Website:	
Major products:	
Official delegate:	
Alternate delegate:	
Name of sponsoring ANAC member:	
Membership Classification	
Regular Members—Type A	
Regular Members—Type B	
Regular Members — Type C	
Associate Members	
○ Industry Support Services including consultants	
O Industry Supplies	
O Industry Associations	
We Wish to be Members of the Following Divisions	
□ Atlantic	
British Columbia	
🖵 Manitoba	
Ontario	
🖵 Québec	
Western Feed Industry Association	

In order to join ANAC, your organization must be a member of at least one division.

For each division in which your organization is a member, please appoint a delegate. The information will be included in ANAC's online Directory of Members.

Atlantic		
Division Delegate Name:		
Job Title:		
Address:		
Telephone:	Fax:	
Cell:	Email:	
British Columbia		
Division Delegate Name:		
Job Title:		
Address:		
Telephone:	Fax:	
Cell:	Email:	
Manitoba		
Division Delegate Name:		
Job Title:		
Address:		
Telephone:	Fax:	
Cell:	Email:	
	-	
Ontario	-	
Ontario Division Delegate Name:		
Division Delegate Name:		
Division Delegate Name: Job Title:	Fax:	
Division Delegate Name: Job Title: Address:		
Division Delegate Name: Job Title: Address: Telephone:	Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell:	Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec	Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name:	Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name: Job Title:	Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name: Job Title: Address:	Fax: Email:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name: Job Title: Address: Telephone:	Fax: Email: Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name: Job Title: Address: Telephone: Cell:	Fax: Email: Fax:	
Division Delegate Name: Job Title: Address: Telephone: Cell: Québec Division Delegate Name: Job Title: Address: Telephone: Cell: Western Feed Industry Association	Fax: Email: Fax:	
Division Delegate Name:Job Title:Address:Telephone:Cell:QuébecDivision Delegate Name:Job Title:Address:Telephone:Cell:Western Feed Industry AssociationDivision Delegate Name:	Fax: Email: Fax:	
Division Delegate Name:Job Title:Address:Telephone:Cell:QuébecDivision Delegate Name:Job Title:Address:Telephone:Cell:Western Feed Industry AssociationDivision Delegate Name:Job Title:	Fax: Email: Fax:	

