

# Regular -Type B Membership Fees 2024

Company Name: \_\_\_\_\_

## Regular Type B Membership is open to:

Commercial manufacturer/seller/distributor/agent of feed ingredients including pharmaceutical/animal health products, vitamins, trace minerals, flavours, enzymes, amino acids, micro-ingredients, major minerals, plant-based ingredients and animal-based ingredients.

## What type of ingredient do you manufacture /distribute? (Choose all that apply.)

Amino Acids _____	Flavours _____	Plant Based Ingredients _____
Vitamins _____	Macro Minerals _____	Animal Based Ingredients _____
Enzymes _____	Trace Minerals _____	Pharmaceutical Products _____
Mycotoxin Binders _____	Microbial Products _____	Other _____

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

\$ Sales	Fees
< \$ 10M	\$1,400
\$10M - < \$25M	\$3,000
> \$25M or more	\$7,500

## Table B—Provincial Fees

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

Province	Categories Sales	Fee Amounts	Fees Owing
Atlantic		\$135	
British Columbia	<\$10M	\$275	
	\$10M - < 35M	\$350	
	>35M	\$450	
Manitoba	1 Site	\$150	
	2 Sites	\$200	
	3 Sites or more	\$250	
Western		\$700	
		<b>Total Fees</b>	

**National Membership Fee** - (Determine the correct amount from Table A)

**Provincial Membership Fees** - (Determine the correct amount from Table B) -

Note: Ontario & Quebec excluded

	<b>GST/HST</b>	
	<b>Amount Owing</b>	

## Please provide:

2023 sales revenue \_\_\_\_\_ 2023 Manufactured volume/tonnage \_\_\_\_\_

Signature \_\_\_\_\_ Print name \_\_\_\_\_

Date: \_\_\_\_\_

# Membership Application

<b>Company:</b>	
<b>Address:</b>	
<b>Telephone:</b>	<b>Fax:</b>
<b>Email:</b>	
<b>Website:</b>	
<b>Major products:</b>	
<b>Official delegate:</b>	
<b>Alternate delegate:</b>	
<b>Name of sponsoring ANAC member:</b>	

## Membership Classification

- ☐ Regular Members—Type A
- ☐ Regular Members—Type B
- ☐ Regular Members —Type C
- ☐ Associate Members
  - ☐ Industry Support Services including consultants
  - ☐ Industry Supplies
  - ☐ 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	
Division Delegate Name:	
Job Title:	
Address:	
Telephone:	Fax:
Cell:	Email:
Québec	
Division Delegate Name:	
Job Title:	
Address:	
Telephone:	Fax:
Cell:	Email:
Western Feed Industry Association	
Division Delegate Name:	
Job Title:	
Address:	
Telephone:	Fax:
Cell:	Email:

