



Canadian Aboriginal and Minority Supplier Council (CAMSC)

Corporate Membership Application Form

CAMSC is a private-sector led, non-profit membership organization.

Our vision: To champion business relationships and economic growth of the Canadian supply chain through the inclusion of Aboriginals and Minority suppliers.

Our mission: To be the nationally recognized, respected and trusted business partner, leading supplier diversity in all industry segments with proven results in wealth and job creation for Aboriginal and minority suppliers.

Benefits of Membership:

- Opportunities to identify competitive suppliers of goods and services
- Opportunities for innovation from new and enterprising suppliers
- Networking opportunities with other major corporations
- Business and community recognition and awards
- Access to networking events
- Assistance in establishing an internal Supplier Diversity program
- Access to Supplier Diversity program training and seminars
- Access to the CAMSC database of certified Aboriginal and visible minority suppliers
- Access to market knowledge regarding doing business with Aboriginal and minority communities

Membership Requirements:

As a member of CAMSC, you are willing to:

- Commit to CAMSC's vision and mission
- Identify opportunities within your company to increase awareness of the availability of Aboriginal and minority suppliers
- Identify opportunities within your company to increase procurement from certified Aboriginal and minority suppliers
- Participate in and support CAMSC networking events, where applicable
- Consider participating in member committees, such as event planning, membership, etc.
- Advocate externally to encourage commitment to CAMSC mission
- Report on dollar purchases from CAMSC certified Aboriginal and minority suppliers
- Pay annual membership fees



Company Name: _____

Company Website: _____

Primary Contact

Name: _____

Title: _____

Street Address: _____

City: _____ Province/State: _____

Postal/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Secondary Contact

Name: _____

Title: _____

Street Address: _____

City: _____ Province/State: _____

Postal/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Financial Contact

Name: _____

Title: _____

Street Address: _____

City: _____ Province/State: _____

Postal/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Please indicate your company's fiscal year period (e.g. January to December): _____ to _____.

Please select the industry sector that best describes/identifies your company's business:

(double click the appropriate box and then click Checked)

- Automotive and Transportation
- Commercial Products/Services (companies whose products/services are sold primarily to other companies)
- Construction
- Consumer Products
- Food and Beverage
- Financial Services
- Health Care
- Information and Communications Technology
- Professional Services
- Other (please describe) _____



Do you have a Supplier Diversity program/policy in place? Yes No

Types of CAMSC programs/services that may be of interest to you:

- Access to Certified Suppliers
- Education Awareness
- Networking Opportunities
- Access to Best Practices
- Other: _____

Types of Annual Membership: (Check one)

- \$20,000 (**Champion** membership)
- \$10,000 (**Leader** membership)
- \$ 5,000 (**Partner** membership, revenue less than \$500MM)
- \$ 2,500 (**Associate** membership, revenue less than \$50MM)

For Corporate Members enquiries, please contact either one of the following:

Fatma Hassan

Director Business Development & Partnerships

fhassan@camsc.ca

416-941-0004 ext. 227

Daphne Shih

Director Business Development & Partnerships

dshih@camsc.ca

416-941-0004 ext. 223

For Corporate Members payment enquiries, please contact the following:

Indira Lokhram

Manager, Support Services

Tel: 416-941-0004 ext. 222 - ilokhram@camsc.ca.

Methods of Payment:

1) Credit Card:

If you are paying by credit card, please complete the attached form, and email to Indira Lokhram (ilokhram@camsc.ca). An e-receipt will be sent to you directly.

2) Electronic Funds Transfer (EFT):

Please forward all required forms for completion to Indira Lokhram (ilokhram@camsc.ca) to complete EFT.

3) Cheque:

Make cheque payable to:

Canadian Aboriginal and Minority Supplier Council

Attention: Indira Lokhram

282 Richmond St. East, Suite 101

Toronto, Ontario M5A 2W8

Fax: 416-941-9282



CREDIT CARD PAYMENT

Company Name: _____

Date: _____

VISA MasterCard AMEX

I hereby authorize CAMSC to charge the credit card below, in the amount of

\$ _____ US CDN

Credit Card #: _____

Expiry Date: _____ / _____

Cardholder Name (PRINT): _____

Signature: _____ Date: _____

Check here to receive an E-Receipt. Print your email address on line below:

Terms: Full payment is due upon submission of application.

Please complete above and submit credit card payment to attention:

Indira Lokhram – via email (ilokhram@camsc.ca)

**Manager, Support Services
282 Richmond St. East, Suite 101
Toronto ON M5A 1P4 Canada**

(Via confidential fax to #: 416-941-9282)