



30 Wertheim Court # 26 | Richmond Hill ON | L4B 1B9 | ph (905) 886-9627 fax (905) 886-9959

Change to Company Representative & Additional Company Contact

Name of Company:

COMPANY REPRESENTATIVE TO THE ASSOCIATION

Name

Telephone

email

SECTION A

Complete this section to make a CHANGE in the Company Representative

Each member shall authorize one person to be its representative on the Association and no member shall be entitled to more than one authorized company representative at any one time. A member may change its authorized representative at any time by notice in writing addressed to the Executive Director.

	Name
Telephone	email

SECTION B Complete this section to DELETE or make REVISION to an existing authorized Additional Company Contact The Company Representative to the Association may authorized the Association by notice in writing to permit Additional Company Contacts to receive communications and access to Association resources. The Company Representative shall prescribe the set permissions for communications for each Additional Contact. Contact: Name email Telephone **Revise Permissions** ASSOCIATION EVENTS \square PAYMENTS / INVOICING As Checked CROSSFLOW MAGAZINE SMACNA (Check Box) GOVERNMENT LEGISLATION TECHNICAL RESOURCES HUMAN RESOURCES \square TRAINING & EDUCATIONAL PROGRAMS LABOUR RELATIONS \square TWOGREYSUITS \square MEETINGS OF MEMBERSHIP WALLY McINTOSH SCHOLARSHIP

SECTION C

Complete this section to ADD Additional Company Contact (s)

The Company Representative to the Association may authorized the Association by notice in writing to permit Additional Company Contacts to receive communications and access to Association resources. The Company Representative shall prescribe the set permissions for communications for each Additional Contact.

Additional Contact:					
		Name	9		
	email				
	Telephone				
Permissions	ASSOCIATION EVENTS		PAYMENTS / INVOICING		
(Check Box)	CROSSFLOW MAGAZINE		SMACNA		
	GOVERNMENT LEGISLATION		TECHNICAL RESOURCES		
	HUMAN RESOURCES		TRAINING & EDUCATIONAL PROGRAMS		
	LABOUR RELATIONS		TWOGREYSUITS		
	MEETINGS OF MEMBERSHIP		WALLY MCINTOSH SCHOLARSHIP		
Additional Contact:					
	Name				
	email				
		Telepho	one		
Permissions	ASSOCIATION EVENTS		PAYMENTS / INVOICING		
(Check Box)	CROSSFLOW MAGAZINE		SMACNA		
	GOVERNMENT LEGISLATION		TECHNICAL RESOURCES		
	HUMAN RESOURCES		TRAINING & EDUCATIONAL PROGRAMS		
	LABOUR RELATIONS		TWOGREYSUITS		
	MEETINGS OF MEMBERSHIP		WALLY McINTOSH SCHOLARSHIP		

Submit an additional form for permission REVISIONS made to more than 1 Additional Contact or when ADDING more than 2 Additional Contacts

For Section A – to be signed by Signing Officer of Company For Sections B & C - to be signed by Company Representative to Association

SUBMITTED THIS	DAY OF	YEAR
Signing Officer		
or — Company Representative	Signature	
	Name	Title