

MEMBERSHIP APPLICATION

Company _____

Address _____

City _____ Province/State _____ Postal/Zip Code _____

Country _____ Website _____

Telephone _____ Fax _____

1. TYPE OF ORGANIZATION

A. Complete This Section **Only** If You Are A Baker

- 1** One:
- 01 Retail (Store Front) Bakery
 - 02 In-store Bakery
 - 03 Foodservice/Institution Baker
 - 04 Donut/Bagel/Muffin Baker
 - 05 Wholesale Baker
 - 06 Wholesale Grocer
- 2** All That Apply:
- 01 Full Product Range
 - 02 Bread
 - 03 Buns & Rolls
 - 04 Bagels
 - 05 Croissants & Danish
 - 06 Cakes
 - 07 Pastries
 - 08 Ethnic-Oriented Products
 - 09 Organic/Natural Foods
 - 10 Other _____
- 3** All That Apply:
- 01 Bakery
 - 02 Deli
 - 03 Restaurant
 - 04 Caterer
 - 05 Wholesaler
 - 06 Other _____
- 4** One:
- 01 Scratch
 - 02 Mix
 - 03 Par-baked
 - 04 Frozen

B. Complete This Section **Only** If You Are An Industry Organization

- 1** One:
- 07 Manufacturer
 - 08 Distributor
 - 09 Manufacturer & Distributor
 - 10 Broker
 - 11 Importer/Exporter
 - 12 Service Provider
 - 13 Government
 - 14 Media
 - 15 School
 - 16 Association
 - 17 Other _____
- 2** All That Apply:
- 11 Ingredients
 - 12 Decorations
 - 13 Finished Products/Frozen Dough
 - 14 Equipment
 - 15 Packaging
 - 16 Transportation/Delivery
 - 17 Maintenance/Sanitation
 - 18 Service & Supplies
 - 19 Other _____

C. Company Structure

- 1** One:
- 01 Sole-proprietorship
 - 02 Partnership
 - 03 Corporation
 - 04 Family-owned Business
 - 05 Chain Or Franchise
- 2** No. of stores operated _____
- 3** No. of employees _____

BAC OFFICIAL REPRESENTATIVE (DESIGNATED VOTING REP.)

Name Mr Ms Mrs (please check) _____

Title _____ E-mail Address _____

2. PRIMARY JOB FUNCTION

- One:
- 01 Owner/Partner/President
 - 02 Vice President/Director
 - 03 Manager/Supervisor
 - 04 Baker/Chef/Cook/Decorator/Pastry Chef
 - 05 Buyer/Merchandiser
 - 06 Sales & Marketing
 - 07 Technical Service Rep/R & D
 - 08 Plant Operations/Engineering

3. PURCHASE ROLE

- One:
- 01 Final Decision
 - 02 Influence Decision
 - 03 Recommend
 - 04 No Role

Additional Names of Individuals to be included on mailing list (ATTACH LIST IF CONTACT INFORMATION IS DIFFERENT)

1 Name Mr Ms Mrs (please check) _____

Title _____ E-mail Address _____

2 Name Mr Ms Mrs (please check) _____

Title _____ E-mail Address _____

MEMBERSHIP FEE (FOR CORRECT FEE, PLEASE CONSULT THE DUES STRUCTURE ON REVERSE)

MEMBERSHIP CATEGORY (PLEASE CHECK ONE)

RETAIL BAKERY <input type="checkbox"/> Retail #outlets _____ <input type="checkbox"/> In-store #outlets _____ <input type="checkbox"/> Chainstore/Franchisor	COMMERCIAL BAKERY <input type="checkbox"/>	TRADESPERSON <input type="checkbox"/>	ALLIED TRADES <input type="checkbox"/> Provincial <input type="checkbox"/> National
---	---	--	---

- Cheque MasterCard VISA AMEX

Sub-total (FEE) = _____

Cardholder Name _____

(Only New Brunswick, Newfoundland & Labrador, Ontario) 13% HST = _____

Charge Card Number _____

(Only British Columbia) 12% HST = _____

Expiry Date (m/y) _____ Signature _____

(Only Nova Scotia) 15% HST = _____

(Rest of Canada/U.S. - GST#8870647798RT) 5% GST = _____

Total = _____



BAKING ASSOCIATION OF CANADA
 7895 Tranmere Dr., Suite 202 Mississauga, ON L5S 1V9
 Tel: 905-405-0288, Toll Free in Canada & USA 1-888-674-BAKE (2253)
 Fax: 905-405-0993 E-Mail: info@baking.ca
 www.baking.ca

Effective as of 07/01/10

MEMBERSHIP CATEGORIES



Membership in the Baking Association of Canada (BAC) is primarily company based and is open to all firms who are currently or thinking about conducting business in the Canadian marketplace. Individual memberships are available under special circumstances as described in the Tradesperson category.

Retail Baker:

Independently owned companies whose primary business is the production and sale of their own baked foods directly to the consumer through their own retail outlet(s). BAC offers a special introductory rate for first time retail baker members.

In-Store Bakers:

Individual and independently owned grocery stores which have an established bakery department but the sale of bakery foods is not their primary business.

Chainstore/Franchisor:

Companies (with a single corporate ownership or acting as a franchisor) with multiple store locations operating under the same name or banner.

Provincial Allied:

Single plant operations which supply goods and services to the baking industry primarily in one province.

National Allied:

Companies which supply goods and services to the baking industry on a national or international basis.

Commercial Bakers:

Bakeries whose primary business is the production and sale of baked foods to retail outlets/food service industries either on a provincial, national or international basis. Membership dues are based on annual sales.

Tradesperson:

Available to individuals who are not employed in the baking industry or their employer is already a member company or the company they work for does not qualify for membership in any other category.

DUES STRUCTURE

BAC Membership Dues

(All fee information is kept in strict confidence)

GST or HST must be added to all fees

	Annual Dues		Annual Dues
Retail Bakery First Year Introductory Offer	\$ 75	Chainstore/Franchisor	\$2,200
Retail Bakery (per outlet)	\$ 125	Allied (National)	\$ 700
In-Store Bakery (per outlet)	\$ 125	Allied (Provincial)	\$ 450
Tradesperson	\$ 100		

Commercial Bakers

Dues Structure: based on \$ million per annual sales rounded to the closest \$ million:

Category	Sales in \$Mil	Base Fee	+ Increment	Annual Dues = Fee
1.	Up to \$10 Million	0	\$250 per \$Million sales	\$ _____
2.	\$10-\$24 Million	\$2,500	\$225 per \$Million sales for \$10-24Mil	\$ _____
3.	\$25 - \$74 Million	\$5,875	\$75 per \$Million sales for \$25-74 Mil	\$ _____
4.	\$75-\$199 Million	\$ 9,625	\$50 per \$Million sales for \$75 – 200Mil	\$ _____
5.	\$200 Million +	\$15,875	\$30 per \$Million sales over \$200 Mil	\$ _____

Example 1: \$5 Million Sales = 5 x \$250 = Fee \$1,250 + GST or HST

Example 2: \$15 Million Sales = \$2,500 + (5 x \$225) = Fee \$3,625 + GST or HST

GST or HST must be added to all fees