



**Membership Application
Owner/Manager**

Company _____

Address _____

City _____

Province _____

Postal Code _____

First Name _____

Middle Initial _____

Last Name _____

Designation(s) _____

Title _____

Telephone _____

Fax _____

Email _____

Owner Owner/Occupied Fee Management Government/Institutional Other

Total Real Estate Portfolio (Owned/Managed) _____ sq. ft.

How did you hear about BOMA New Brunswick?

Member Website Email Colleague Other _____

Membership Fee (Please check the appropriate dues)

2010 Fees for Owner/Manager Membership: \$495 + HST (Term January 1, 2010 to December 31, 2010)

2010 Fees for Canadian Member at Large: \$125 NO HST

Credit Card Payment Visa Mastercard Please Invoice: PO # _____

Credit Card Number _____ Expiration Date _____

Card Holder's Name _____ Total Charge \$ _____

Signature _____

By providing the above information, I consent to receive communications from BOMA New Brunswick, or as authorized by BOMA New Brunswick.

I hereby request membership in the Building Owners and Managers Association of New Brunswick.

Applicant Signature _____

Date of Application _____

Please fax all applications to Meredith Arsenault at (506) 384-5852

BOMA NB P.O. Box 1, Moncton, NB E1C 8R9