



MEMBERSHIP APPLICATION FORM

Thank you for your interest in the Canada Mining Innovation Council. Please complete the following application as part of the membership process.

Organization Information

Organization Name: _____
Street: _____
City: _____
Province/State: _____
Country: _____
Postal Code: _____

Company Representative

(Primary contact between your company and CMIC)

Name: _____
Title: _____
Email address: _____
Street: _____
City, Province/State: _____
Country, Postal Code: _____
Mobile: _____
Telephone: _____

Billing Contact

(This information is required so CMIC can send an invoice for membership dues.)

Same as above or fill out the form below.

Name: _____
Title: _____
Email address: _____
Street: _____
City, Province/State: _____
Country, Postal Code: _____
Mobile: _____
Telephone: _____



CMIC Membership Tiers
(Please check one of the following)

Strategic Member	\$100,000
Enterprise Member	\$50,000
Solutions Member	
<i>Operating Mining Company</i>	\$25,000
Supplier	
<i>Annual Corporate Revenue >\$50 million</i>	\$11,000
<i>Annual Corporate Revenue <\$50 million</i>	\$5,000
Exploration Company	
<i>Market Cap > \$50 million</i>	\$11,000
<i>Market Cap > \$50 million</i>	\$5,000
Associate Member	
<i>Associations, Labs, Universities, Centres etc.</i>	\$5,000
<i>Government (Federal, Provincial, Territorial)</i>	\$11,000

Membership Eligibility

- As a new member, we agree to publicly announce that we have joined CMIC.
- As a Member, we agree to provide a logo (or directions to obtain a logo) for CMIC's use in recognizing Member's relationship with CMIC.

Signature _____

Name (please print) _____

Date _____

[Click here to submit your application!](#)

***All Membership applications are reviewed and approved by
the Board of Directors.***