



## MEMBERSHIP APPLICATION

Suppliers and Associate Members

### YOUR COMPANY INFORMATION

Company Name:

Company Name for  
Marketing Purposes:

☐ Same as the Above or:

Primary Contact (Print):

Email Address:

Secondary Contact (Print):

Email Address:

Mailing Address:

Postal Code:

City:

Province:

Office Telephone:

Cell Phone:

Website:

Facebook URL:

Instagram URL:

Twitter URL:

### CANADIAN HOME BUILDERS' ASSOCIATION CODE OF ETHICS

- Members shall comply with ALL applicable Building Codes of Canada as a minimum standard of construction and shall work towards its improvement in the interests of structural sufficiency, safety, and health.
- Members shall plan their sites and homes to conform to the principles of good community planning and support for the environment.
- Members shall deal justly with their employees, subcontractors and all suppliers of all goods and service commitments.
- Members shall exchange information and experience, and encourage research on materials, technical advancements and building techniques to prove the best value for their customers.
- Members shall avoid all conduct or practice detrimental to the house building industry, to the Association, to the good name or reputation of any of its members, staff, or customers.
- Members shall commit to continuing learning through human resource policies and practices, including employment practices which treat employees as assets.
- Members shall actively promote health and safety principles.
- Members shall treat their competitors, including their property and ideas, with respect.

These responsibilities are freely and solemnly assumed as they form part of an obligation as a Member of the Canadian Home Builders' Association.

A copy of the By-Laws can be found here: <https://www.nbhomebuilders.ca/by-laws/>

### ACCEPTANCE OF BY-LAWS AND CODE OF ETHICS

I hereby acknowledge receipt of the Association's By-laws and Code of Ethics, and I solemnly promise to operate my Company in accordance with spirit and intent of the CHBA Code of Ethics.

I Agree

I Disagree

### WERE YOU REFERRED?

Like many other businesses, CHBA Membership grows by referrals. If a Member suggested you join our Association, please tell us who so that they may be recognized and thanked.

Name (Print):

Company:

If you were not referred by a Member company, how did you hear about Membership with CHBA-NB?

Radio

Direct Email

Social Media

Postcard

Chamber Ad

Other \_\_\_\_\_

### DECLARATION FOR ALL MEMBERSHIP APPLICANTS

I hereby make application for membership with the Canadian Home Builders' Association. I certify that none of the principles of my Company has been refused membership, refused renewal of membership, or had membership revoked by any level of the Canadian Home Builders' Association, across Canada.

I hereby consent that should I own other companies that are not members, that these companies will not use the Association Logo or refer to membership with the Canadian Home Builders' Association whatsoever.

I declare that all information contained in this application to be true and accurate, and I authorize the Association to undertake what actions it deems necessary to confirm the accuracy of information contained in this application including but not limited to a verification of credit worthiness of the applicant through the Atlantic Credit Agency or other agencies as the Association may deem appropriate. I agree that the Board of Directors of the Association reserves the right to reject any application for membership in the Association, or to defer consideration of an application. Should my application be rejected, I agree to indemnify and save harmless the Association and its directors from any and all loss, cost, claims or damage of whatever kind and however arising as a result of such refusal of this application.

It is the mandate of the Canadian Home Builders' Association (CHBA) at all levels; Locally, Provincially and Nationally, to provide information, promote membership and foster communications. Some samples of how we do this are:

- Link from our website to your website.
- Listing your company on our website.
- Creating, boosting, and running Facebook Ads promoting you as a professional and a member of this Association.

- Radio Ads.
- Advertising associated with the Awards of Excellence, should you wish to participate.
- Listing of your company and contact information in our Directories which are available at our member vendor locations and at home shows in your area.
- Listing your Company in our Annual Magazine distributed at home shows, sent digitally through social media and at various kiosks throughout New Brunswick.

As a Supplier and Associate member of this Association I hereby consent and acknowledge that the information contained in this application is true to the best of my knowledge. I further hereby consent to and agree that as a member of the Association, I will adhere to the By-laws at all levels of the Association as they apply to my company, I will maintain in good standing the requirements to be a member of the Association and I will act in compliance with the CHBA Code of Ethics.

Signature of Applicant: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE DESCRIBE THE PRIMARY SERVICES YOUR COMPANY PROVIDES

PAYMENT INFORMATION		
Company Name: _____ Primary Contact (Print): _____		
Accounting Contact Email: <i>(this is where we will send your invoices and receipts)</i>		
Company Billing Address: _____	City: _____	Postal Code: _____
Payment Calculations		
Annual Membership Dues for all Companies Outside of the Moncton Area (50km):	\$1,060.24(\$921.95+HST)	\$ _____
Annual Membership Dues for Moncton Companies:	\$1,392.59 (\$1,041.88	\$ _____
<b>Total:</b>	+HST)	\$ _____
<p>Our Membership Year runs from November 1 to October 31 annually. Membership applications received after January in each membership year are prorated. Upon approval of your application, your credit card will be charged the appropriate amount, and a copy of the invoice and receipt will be emailed to your accounting contact noted above.</p>		
Credit Card Number: _____	Expiry Date: _____	CVC: _____
Name on the Card (Print): _____	Postal Code _____	
Card Holder Signature: _____		