

Canadian Anti-Money Laundering Institute



Canadian Anti-Money Laundering Institute
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CAMLI Membership Form - referred by _____

Name of Company			
Delegate Name			
Email Address			
Phone Number		Fax Number	
Street Address			
City/Town/Province		Postal Code	

Register Via: Phone, Fax, Email, or Mail	Province/Territory	Single Membership \$400+ taxes for 2 years	Multiple Membership (3 or more at the same time) \$350+ tax for 2 years per person
<input type="radio"/> Cheque Enclosed <input type="radio"/> Money Order Enclosed <input type="radio"/> Credit Card	15% NB, NL, NS, PEI	\$460.00	\$402.50
	13% ON	\$452.00	\$395.50
	5% AB, BC, MB, QC, SK, NT, NU, YT	\$420.00	\$367.50

1. Amount Authorized _____ [Please Print]
2. Card Type: MasterCard VISA American Express Discover
3. Name on Card: _____
4. Number on Card: _____
5. Billing Address: _____
6. Expiry Date (month/year): _____
7. Signature: _____