



**WESTERN CANADA CEMETERY ASSOCIATION INC.**

Box 31008 RPO Broadway & Taylor  
Saskatoon, SK S7H 5S8

Email: [administration@westerncemetery.com](mailto:administration@westerncemetery.com)

Phone: (403) 507-9359

**APPLICATION FOR MEMBERSHIP 2021**

COMPANY NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE: \_\_\_\_\_

**TYPE OF MEMBERSHIP**

\_\_\_\_\_ **Cemetery Member** (Cemeteries located within Saskatchewan, Manitoba or Alberta)

	<b>Annual Interments Dues</b>	
_____ Municipal	<input type="checkbox"/> 0-25.....	\$ 68.00
_____ Religious	<input type="checkbox"/> 26-100 .....	\$121.00
_____ Private Corporation	<input type="checkbox"/> 101-250 .....	\$242.00
_____ Private (Other)	<input type="checkbox"/> 251-500 .....	\$347.00
	<input type="checkbox"/> 501-750 .....	\$478.00
	<input type="checkbox"/> Over 750 .....	\$620.00

*Please use the 2020 calendar year to calculate your dues by the number of all types of Interments and scatterings completed in the year.*

Other Types of Memberships:

\_\_\_\_\_ **Multiple Entity Member** (Any cemetery with multiple locations or entities) # of Interments per member province.  
*(use table above)*

\_\_\_\_\_ **Supplier Member** ..... \$263.00  
A supplier member shall be an individual, company or corporation engaged in producing or supplying products or services used in the operation of a cemetery, including consulting and technical service.

\_\_\_\_\_ **Associate Member** (Cemetery located outside WCCA area) ..... \$116.00  
An associate member shall be an individual, a company or corporation actively engaged in the operation of a cemetery, whose location of business is outside the perimeters of the three Western provinces.

\_\_\_\_\_ **Affiliate Member** (Funeral Home, other Association) ..... \$116.00  
Affiliate members shall be those individuals, businesses, or corporations engaged in providing a service to the public, which is directly related to the professional operation of a cemetery.

*I hereby apply for Membership for the Western Canada Cemetery Association Inc. and enclose payment (cheque or credit card, NO GST) for Association dues for the current year.*

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Method of Payment  Cheque (payable to **Western Canada Cemetery**)

Visa  Mastercard  Other

Credit Card Number: \_\_\_\_\_

Name as it appears on Credit Card: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_ CIV \_\_\_\_\_

Card Holder Signature: \_\_\_\_\_