



## Regular Freight Forwarder's Membership Application Form

### Qualifications for Regular Freight Forwarding Membership

- A. Regular membership in the Association shall be restricted to persons or corporations who carry on business and maintain business premises in Canada as International Freight Forwarders.
- B. That freight is handled for principals exclusively, which freight moves principally from Canada to points or places abroad, or in the reverse direction.
- C. The firm is not in any manner subsidiary to, or owned in whole or in part by any shipper, consignee, exporter, importer or primary carrier of goods, or who buys or sells or acts as buying or selling agent in any manner whatsoever.
- D. To abide by the CIFFA Standard Trading Conditions as approved by the National Membership, or Corporate Trading Conditions no less onerous than those of CIFFA.
- E. To abide by the Association's requirement to secure, at our own cost, Freight Forwarders Liability Insurance coverage, including Errors and Omissions and liability assumed under a FIATA documents, including the multimodal transport of lading, when applicable, with a minimum liability in the amount in Canadian currency of (\$250,000.00) two hundred and fifty thousand dollars per occurrence (*such proof to be attached to application*). Such liability coverage to be in accordance with the particular requirements of the member. (N.B. Thereafter, annual submission of proof of coverage is member's responsibility.)
- F. Dangerous Goods Compliance - CIFFA members must abide by the requirements of the laws of Canada that There be qualified personnel in every office handling dangerous cargo. Submission of identification of trained individuals in each Member's office is required in writing to the CIFFA Secretariat within six months of approval of membership to the Association.
- G. A high degree of professional conduct and ethics is maintained in all business deals.
- H. The aim of the Association will be pursued at all times.
- I. New members will be subject to a 6 month waiting period for access to FIATA documents. New Members receive membership in FIATA with the start of each calendar year, January first.

### CIFFA'S Code of Ethics

#### Every CIFFA member pledges to abide by this professional code of conduct which states as follows:

- The CIFFA regular member must discharge his duties with honesty and integrity.
- The CIFFA regular member pledges a standard of competence to his client, to perform in a conscientious, Diligent and efficient manner, services undertaken on the client's behalf.
- The regular member pledges to hold in strict confidence, all information acquired in the course of the Relationship concerning the business and the affairs of his client. No such information is to be divulged unless authorized by the client, or required by law.
- The CIFFA regular member agrees to observe all relevant laws of Canada regarding the movement of goods entrusted to him.
- The CIFFA regular member owes a duty to his client, not to withdraw his services, except for good cause, and upon appropriate notice.

*This firm hereby applies for Regular Membership in CIFFA, and requests that the persons listed hereafter as its representatives.*

*If admitted, the firm and its representatives will be governed by the present and future By-Laws of the Association and undertake to pay such fees as may be properly authorized.*

*Before completing this form, please read:*

- the qualifications for membership
- fee description
- the Code of Ethics for Members

Date:		
Name of Firm:		
Head Office Address:		
Tel:	Toll Free:	Fax:
Web Address:		General Email:
Nature of Business (main functions):		
No. of Branch Offices: (Attach contact list of all branch offices)		No. of Employees:
Name of Person Completing Application:		
Email:		
President:	Email:	
Vice President:	Email:	
Secretary:	Email:	
Treasurer:	Email:	
Name of Designated Firm Representative:		
Designate's Email:		
Name of Alternate Representative:		
Alternate's Email:		
Proposed By:	Email:	
Name of Current CIFFA Regular Member		
Seconded By:	Email:	
Name of Current CIFFA Regular Member		
Applicant Firm:		
Applicant Signature and Title: (Company Official)		

Person with overall responsibility for Airfreight: Not Applicable: <input type="checkbox"/>	Person with overall responsibility for Oceanfreight: Not Applicable: <input type="checkbox"/>		
Name:	Name:		
Title:	Title:		
Tel.:	Tel.:		
Fax:	Fax:		
Email:	Email:		
Person with overall responsibility for Rail Transportation: Not Applicable: <input type="checkbox"/>	Person with overall responsibility for Road Transportation: Not Applicable: <input type="checkbox"/>		
Name:	Name:		
Title:	Title:		
Tel.:	Tel.:		
Fax:	Fax:		
Email:	Email:		
Person with overall responsibility for HR/Training: Not Applicable: <input type="checkbox"/>	Person with overall responsibility for technical Dangerous Goods issues: Not Applicable: <input type="checkbox"/>		
Name:	Name:		
Title:	Title:		
Tel.:	Tel.:		
Fax:	Fax:		
Email:	Email:		
No. Of Branch Offices (Attach contact list of all branch offices)	<b>Office Information</b> No. of employees: No. of offices in Canada:		
	(Attach list of employee email addresses for daily ebulletin)		
<b>What service(s) is your company mainly involved in? (select as many as applicable)</b>			
<input type="checkbox"/> Air transportation	<input type="checkbox"/> Ocean transportation	<input type="checkbox"/> Rail transportation	<input type="checkbox"/> Other
<input type="checkbox"/> Road transportation	<input type="checkbox"/> Customs	<input type="checkbox"/> Logistics	
<input type="checkbox"/> Warehousing	<input type="checkbox"/> Distribution	<input type="checkbox"/> Projects	
Is your company an IA TA Cargo Agent?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is your company an Individual Member of CSCB?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is your company an Individual Member of AICBA?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is your company an Individual Member of FIATA?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>What area(s) in the world does your company specialize in? (select as many as applicable)</b>			
<input type="checkbox"/> North America	<input type="checkbox"/> Central America	<input type="checkbox"/> South America	<input type="checkbox"/> Caribbean
<input type="checkbox"/> Europe	<input type="checkbox"/> Middle East	<input type="checkbox"/> Africa	<input type="checkbox"/> Central Asia
<input type="checkbox"/> Eastern Asia	<input type="checkbox"/> South-Eastern Asia	<input type="checkbox"/> South Pacific	
Errors and Omissions Insurance in place (min. CAD \$250,000.00) (Attach proof of Insurance with completed application)		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Policy Expiry Date:			
Person with overall responsibility for Errors and Omissions Insurance:			
Title:		Email:	
Tel.:		Fax:	
Incorporation Date:		Federal :	Provincial :
Shareholder Structure: If other than individual, then shareholders, officers and/or directors of the corporation must be shown along with percentage owned of said corporation.			
Shareholder(s):		Percentage owned:	
Has the Applicant or any person who is financially associated with the Applicant been found guilty of willful violation of any fiduciary obligation to the public? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes, please give details:			

## Fee Description

- Each firm may name two representatives, a Designated Representative and an Alternate Representative.
- Whilst both representatives may attend meetings, etc., only one, the Designated Representative may vote. In the absence of the Designated Representative, the Alternate Representative may vote.
- Representatives can only be changed, in writing, by a Member firm with the approval of the Association.
- The annual fee currently in effect is payable at the time of application for membership, and is pro-rated from the date of approval (make cheque payable to CIFFA).

**Please note that the application for membership must be supported by two current Regular CIFFA Members of good standing.**

CIFFA Regular Membership Fees* - Effective January 1, 2008	Fee	GST	TOTAL
One or more forwarding offices in one Province in Canada	\$950.00	\$47.50	\$997.50
One or more forwarding offices in two Provinces in Canada	\$1,295.00	\$64.75	\$1,359.75
One or more forwarding offices in three Provinces in Canada	\$1,695.00	\$84.75	\$1,779.75
One or more forwarding offices in four or more Provinces in Canada	\$1,995.00	\$99.75	\$2,094.75

\*membership fees are non-refundable

SUBSIDIARY COMPANIES: A subsidiary company is defined as a company where the regular CIFFA member has a controlling interest of over 50% ownership. The fee for a subsidiary company located in one Region would be \$295.00 plus 5% GST (\$14.75) Total of \$309.75. For each subsequent office located in any of the other two Regions, a fee of \$65.00 plus 5% GST (\$3.25) Total of \$68.25 per Region would apply.

### Make cheque payable to CIFFA

170 Attwell Drive, Suite 480  
Toronto, Ontario M9W 5Z5

### Please check off the Regional Office to which this application applies.

- Western Region (B.C., AB, SK, Nunavut, NWT, Yukon)  
 Central Region (MB, ON)  
 Eastern Region (QC, N.B., N.S., P.E.I., NF)

For Regional Committee & Events Information: [www.ciffa.com/news.asp](http://www.ciffa.com/news.asp)

<b>Payment Options:</b> <input type="checkbox"/> Cheque <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
Person's Name on card:
Signature on card:
Card Number: (no spaces)
Expiry Date: (mm/yyyy)

Questions regarding membership should be addressed to the Secretariat's Membership Coordinator at email [membership@ciffa.com](mailto:membership@ciffa.com)

<b>For Official Use Only:</b>
Credit Card Authorization No.: _____
Date Processed: _____

To view CIFFA's Privacy Policy please visit [www.ciffa.com/privacy.asp](http://www.ciffa.com/privacy.asp)

Effective 01/01/2008