



**Canadian Franchise
Association™**

**Canadian Franchise Association
FRANCHISE SYSTEM 2015/16 MEMBERSHIP RENEWAL DECLARATION**

Please answer **ALL** questions. Indicate your dues category based on the total of gross sales (defined as the total system wide sales in Canada and not just royalty revenues of the Franchisor). Read the Declaration & Acknowledgment and check () the Signature Box to sign the form once you have filled out your information.

DUES SCHEDULE:

Membership Dues Chart based on Gross Sales in Canada					
Gross Sales	Dues	Gross Sales	Dues	Gross Sales	Dues
<input type="checkbox"/> Up to \$500,000	\$975	<input type="checkbox"/> \$8,000,001 - \$10,000,000	\$3225	<input type="checkbox"/> \$300,000,001 - \$500,000,000	\$5475
<input type="checkbox"/> \$500,001 - \$1,000,000	\$1225	<input type="checkbox"/> \$10,000,001 - \$15,000,000	\$3475	<input type="checkbox"/> \$500,000,001 - \$750,000,000	\$5725
<input checked="" type="checkbox"/> \$1,000,001 - \$1,500,000	\$1475	<input type="checkbox"/> \$15,000,001 - \$20,000,000	\$3725	<input type="checkbox"/> \$750,000,001 - \$1,000,000,000	\$5975
<input type="checkbox"/> \$1,500,001 - \$2,000,000	\$1725	<input type="checkbox"/> \$20,000,001 - \$25,000,000	\$3975	<input checked="" type="checkbox"/> \$1,000,000,001 - \$1,500,000,000	\$6225
<input type="checkbox"/> \$2,000,001 - \$2,500,000	\$1975	<input type="checkbox"/> \$25,000,001 - \$50,000,000	\$4225	<input type="checkbox"/> \$1,500,000,001 - \$2,000,000,000	\$6475
<input type="checkbox"/> \$2,500,001 - \$3,000,000	\$2225	<input type="checkbox"/> \$50,000,001 - \$75,000,000	\$4475	<input type="checkbox"/> \$2,000,000,001 - \$2,500,000,000	\$6725
<input type="checkbox"/> \$3,000,001 - \$4,000,000	\$2475	<input type="checkbox"/> \$75,000,001 - \$100,000,000	\$4725	<input type="checkbox"/> \$2,500,000,001 - \$3,000,000,000	\$6975
<input type="checkbox"/> \$4,000,001 - \$6,000,000	\$2725	<input type="checkbox"/> \$100,000,001 - \$150,000,000	\$4975	<input type="checkbox"/> \$3,000,000,001 - and over	\$7225
<input type="checkbox"/> \$6,000,001 - \$8,000,000	\$2975	<input type="checkbox"/> \$150,000,001 - \$300,000,000	\$5225		

PAYMENT METHOD:

APPLICABLE SALES TAX CHART		Method of Payment:	Credit Card Number:
GST/HST Registration Number: R122972920		<input checked="" type="checkbox"/> VISA	
QST Registration Number: 1212953071		<input type="checkbox"/> MASTERCARD	Expiry:
		<input type="checkbox"/> AMEX	
		<input checked="" type="checkbox"/> Please INVOICE me	Cardholder Name:
		<input type="checkbox"/> CHEQUE to follow	Signature:
		Annual Dues: \$	
		Applicable Taxes: \$	
		Total: \$	
RENEWAL FORM AND PAYMENT DUE: OCT. 31, 2015			

PLEASE ANSWER THE FOLLOWING: (If you answered "yes" to any of the below, please provide details in an attached schedule.)

Has the member, or any predecessor of the member, or any major shareholder (10% or more), director, officer or general partner of the member having day-to-day management responsibilities related to the franchise:

- | | |
|---|---|
| 1. Been involved with any franchise system which has failed in the past or had any registration or licence in any jurisdiction suspended or cancelled? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| 2. Been adjudged or voluntarily become bankrupt; reorganized due to insolvency; taken the benefit of any statute for the relief of bankrupt or insolvent debtors; or become subject to any pending bankruptcy, insolvency or reorganization proceeding? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| 3. Had any conviction for an indictable offence under the Criminal Code of Canada, arising within the last seven (7) years, which remains outstanding? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

DECLARATION & ACKNOWLEDGMENT: My signature below acknowledges, on behalf of my organization, that the information given is true, that the organization I represent endorses and subscribes to the Canadian Franchise Association's Disclosure Document Guide and the CFA Code of Ethics and that any failure to do so may result in suspension of membership privileges or termination of membership without refund of dues paid. By checking the "Agreement/Signature" I authorize the above.

Company Name: <i>FranNet</i>	Date: <i>8-20-15</i>
Authorized Signing Officer: <i>John A. Blair</i>	Title: <i>VP, Mktg + PR</i>
<input checked="" type="checkbox"/> Agreement & Signature of Signing Officer: <i>[Signature]</i>	

Renewal Form and Payment Deadline: October 31, 2015

Kindly return your completed renewal form to the CFA Membership Department by:

E-mail: membership@cfa.ca • Fax: 416-695-1950 • Mail: 116 - 5399 Eglinton Avenue West, Toronto, ON M9C 5K6

Questions? Contact Rose Ficco, Assistant Manager, Membership, at rificco@cfa.ca or call 416-695-2896 ext. 245



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		<input type="checkbox"/> CHEQUE to follow	
		Annual Dues:	\$
		Applicable Taxes:	\$
		Total:	\$
RENEWAL FORM AND PAYMENT DUE: OCT. 31, 2015			

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Authorized Signing Officer: <i>John A. Blair</i>	Title: <i>VP, Mktg + PR</i>
<input checked="" type="checkbox"/> Agreement & Signature of Signing Officer: <i>[Signature]</i> (please check box)	

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