



## MEMBER INFORMATION (Required)

Prefix: \_\_\_\_\_ First name: \_\_\_\_\_

Last name: \_\_\_\_\_ Institution: \_\_\_\_\_

## CONTACT INFORMATION (Required)

Address: \_\_\_\_\_ Country: \_\_\_\_\_

Address (line 2): \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Primary Email: \_\_\_\_\_

Province/State: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

Postal Code/Zip: \_\_\_\_\_ **Province of Residence:** \_\_\_\_\_

Preferred email for receiving CAES communications (circle one):                      Primary                      Alternate

CAES Membership Directory (circle one):                      Yes                      No

## AREAS OF INTEREST/EXPERTISE

CAES wants to hear from you! As part of our ongoing efforts to serve our membership at the highest quality level, we are interested in knowing what areas are of the most interest to you, and your area(s) of expertise.

- |   |  |
|---|--|
| <input type="checkbox"/> Agricultural Finance and Management  | <input type="checkbox"/> Industrial Organization                             |
| <input type="checkbox"/> Consumer, Demand and Price Analysis  | <input type="checkbox"/> Institutional, Experimental & Behavioral Economics  |
| <input type="checkbox"/> Econometrics and Statistical Methods | <input type="checkbox"/> Natural Resources, Water, & Environmental Economics |
| <input type="checkbox"/> Food & Agricultural Policy           | <input type="checkbox"/> Rural and Community Development                     |
| <input type="checkbox"/> Food Safety, Health and Nutrition    | <input type="checkbox"/> Teaching, Learning and Communication                |
| <input type="checkbox"/> International Trade                  | <input type="checkbox"/> Other   |

**Other Area(s) of Interest:** \_\_\_\_\_

## AFFILIATION (Required)

University / College     Industry / Producer Group     Business     Government     Other

Other: \_\_\_\_\_



## MEMBERSHIP LEVEL

- \$125 – Regular Professional
- \$65 – Retiree
- \$75 – Early Career – Professional Provide Graduation Date: \_\_\_\_\_
- \$30 – Student – Provide Expected Graduation Date: \_\_\_\_\_

## AMOUNT OWING

\$ \_\_\_\_\_ **Membership Amount.** *This matches the membership level selected above.*

\$ \_\_\_\_\_ **Tax on Membership Amount.** **\*\*\*Calculate the tax owed on membership amount as follows:**

GST of 5% for members residing in the provinces of BC, AB, MB, SK, QC, NWT, YK, NU  
HST of 13% for members residing in the provinces of ON, NB, NL  
HST of 14% for members residing in the province of PEI  
HST of 15% for members residing in the province of NS

\$ \_\_\_\_\_ **Donation to Foundation.** Tax receipts are issued for any donation of \$25 or more:

\$ _____ Student Travel Grants	\$ _____ Journal Awards
\$ _____ Educational Events	\$ _____ Undergraduate Book Prize
\$ _____ Thesis Awards	\$ _____ Any

**\$ \_\_\_\_\_ TOTAL OWED (add membership, tax and donation amounts given above)**

## PAYMENT

- A cheque is enclosed. **Payable to CAES** (Canadian funds, drawn on a Canadian bank)
- Credit Card. (Visa and MasterCard only)

Card Number: \_\_\_\_\_ Expiry Date \_\_\_\_\_

Signature: \_\_\_\_\_