



**Association des tours
opérateurs du Québec**

**Association of Tour
Operators of Quebec**

APPLICATION FOR MEMBERSHIP IN THE ASSOCIATION OF TOUR OPERATORS OF QUEBEC

Company Name : _____

O.P.C. Permit Number : _____

N.E.Q. (Québec entreprise Number) : _____

Civic Address of the Company : _____

Representative's name and title : _____

Phone number + ext : _____

Email : _____

| Revenues in \$ Cad | | | Annuel Contribution + taxes not inc. | Renewal √ | New √ |
|--------------------|------|---------------|---|------------------|--------------|
| \$1 | à | \$1,000,000 | \$450 | | |
| \$1,000,001 | à | \$3,000,000 | \$600 | | |
| \$3,000,001 | à | \$10,000,000 | \$900 | | |
| \$10,000,001 | à | \$40,000,000 | \$1,400 | | |
| \$40,000,001 | à | \$100,000,000 | \$2,400 | | |
| \$100,000,001 | à | \$400,000,000 | \$4,000 | | |
| \$400,000,001 | et + | | \$7,000 | | |

Date : _____

Signature : _____

Please return your application form to :
A.T.O.Q.
152 rue Notre-Dame East – Suite 800
Montréal, Qc
H2Y 3P6
Fax : (514) 398-9860 – Courriel : nathalie@atoq.ca

An invoice will follow by mail. Thank you for your precious collaboration!