

PORTFOLIO MANAGEMENT ASSOCIATION OF CANADA (PMAC)

APPLICATION FOR AFFILIATE MEMBERSHIP

SECTIONS:

- A. FIRM CONTACT INFORMATION
- **B. AFFILIATE STATUS CRITERIA**
- **C. TERMS & CONDITIONS**

Please return completed application via any of the following ways:

- Email: info@pmac.org
- Mail: PMAC, 1 Toronto Street, Suite 905, Toronto, Ontario, M5C 2V6

Please Note: Payment is not due at time of application. Upon approval of application, an invoice will be issued for the annual fee, prorated to the closest month.

Your privacy is important to us. PMAC collects, uses or discloses your personal information only in accordance with and for the purposes outlined in the <u>PMAC Privacy Policy</u>.

SECTION A - FIRM CONTACT INFORMATION



Firm Contact Information – PLEASE PRINT OR TYPE ALL RESPONSES

Firm Name				Acronym	
Mailing Address		Suite Number	City, Province	Postal Code	
Telephone Number	Toll-Free Phone Number	Firm Email	Web	site	
In order to ensure that individuals listed belot access to the PMAC Please note: by provindividuals to the receor withdraw this construction.	at we have the correct indiving for whom you wish to have Members-Only area of the viding the following contact is eight of any commercial elections, please contact Gillian Members	duals for PMAC ove involved with F website and to be information, you a tronic messages	communications, pleas PMAC. Email addresse added to distribution I are also consenting on that PMAC may send f	te identify the applicable es are needed to set up lists for PMAC e-Bulletins. behalf of each of these from time to time. To change	
Firm Staff Informati Primary Contact to PM	ION MAC for official matters and not	tices			
· · · · · · · · · · · · · · · · · · ·					
First Name	Last Name			Preferred Name	
Title / Position		En	nail Address		
Telephone Number		Address (if different fro	om firm mailing address)		
Public Contact for pub	olic listing on PMAC website	□ Sa	me as Primary		
First Name	Last Name			Preferred Name	
Title / Position		En	nail Address		
Telephone Number		Address (if different fro	om firm mailing address)		
Sponsorship / Market	ting Contact	□ Sa	me as Primary		
First Name	Last Name			Preferred Name	
Title / Position		En	nail Address		
Telephone Number		Address (if different fro	om firm mailing address)		
Please Note: There is no limit to the number of firm staff who may receive PMAC Affiliate member benefits and be on the PMAC mailing list. Please attach supplemental pages if you would like to add additional firm staff.					

SECTION B - AFFILIATE STATUS CRITERIA



PMAC Affiliate Membership is available to major suppliers and/or professional advisors to the investment industry, who are considered leaders in their fields. Affiliates may benefit from participation with the Association and whose participation with the Association may be of benefit to PMAC Members.

1.	Please specify your firm's conne	ection to the investment industry.
	Accounting Firm Consultant	☐ Insurance ☐ Law Firm
	Compliance Custodian Other (please specify):	☐ Technology Solution Provider
2.		C Members that are presently clients or customers. ew a list of PMAC Members: https://pmac.org/firms/?all_firms=true)
3.	How do you hope to participate	as an Affiliate and/or utilize your Affiliate Membership?
4.		deally leaders in their field and/or suppliers whose business is ement segment of the industry. Please describe how your teria.

SECTION C - TERMS & CONDITIONS



Participation in and/or hosting of PMAC events, seminars or conferences is encouraged by Affiliates, but may be limited in certain circumstances, and may be subject to PMAC committee approval.

As an Affiliate of PMAC, you may market your Affiliate Status and/or committee participation with PMAC on your website or in other client marketing materials; however, such marketing activity does not constitute or imply endorsement, sponsorship or recommendation of services by PMAC. It is agreed that PMAC may need to review/approve any use of the PMAC logo or any reference to PMAC in your firm's marketing materials.

It is understood that as part of our service to Members, PMAC may survey Affiliates from time to time.

It is understood that PMAC may limit the number of its Affiliates and Affiliate Status may be refused if we have reached capacity in terms of total affiliates and/or supplier type. PMAC also reserves the right to limit Affiliates' participation on PMAC committees from time to time.

It is understood that the PMAC Board of Directors or Executive Committee may terminate, cancel or temporarily suspend an Affiliate's Status with PMAC if, in its judgement, the Affiliate has violated any material provision of the applicable legislation under which it is registered and/or ceased to meet the conditions for Affiliate Status or for the failure to pay any annual or special fees, dues or assessments.

At the discretion of the Board, if an Affiliate's actions are not in the best interest of the Association, such Status may be terminated.

I confirm that I have read and understood the terms and conditions of PMAC Affiliate

Name of Authorized Signing Officer	Signature of Authorized Signing Officer	Date
Affiliate Membership Accepted	I by the Portfolio Management Asso	ciation of Canada (PMAC):
Signature of PMAC President	Date of Approval	

Membership: