

Name of Company or Org'n \_\_\_\_\_

Department (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Prov/State \_\_\_\_\_ Code \_\_\_\_\_

Company Tel \_\_\_\_\_ Ext \_\_\_\_\_ Fax \_\_\_\_\_

Company E-mail \_\_\_\_\_

Web 1 \_\_\_\_\_ Web 2 \_\_\_\_\_

Facebook \_\_\_\_\_ Twitter \_\_\_\_\_

List **up to 4** staff members in your office - **please**, only those who deal with campus programmers.  
 (\* N.B. The 1<sup>st</sup> name listed will be your primary COCA delegate and will receive official COCA notices.)

- \* **1. Name** \_\_\_\_\_ Title \_\_\_\_\_
- Tel. \_\_\_\_\_ Ext \_\_\_\_\_ E-mail \_\_\_\_\_
- N.B. Primary contact automatically listed in Membership Directory and must agree to receive COCA mass email.
- 2. Name** \_\_\_\_\_ Title \_\_\_\_\_
- Tel. \_\_\_\_\_ Ext \_\_\_\_\_ E-mail \_\_\_\_\_
- Check if applicable:    1. Name appears in Directory     2. Receives COCA mass email
- 3. Name** \_\_\_\_\_ Title \_\_\_\_\_
- Tel. \_\_\_\_\_ Ext \_\_\_\_\_ E-mail \_\_\_\_\_
- Check if applicable:    1. Name appears in Directory     2. Receives COCA mass email
- 4. Name** \_\_\_\_\_ Title \_\_\_\_\_
- Tel. \_\_\_\_\_ Ext \_\_\_\_\_ E-mail \_\_\_\_\_
- Check if applicable:    1. Name appears in Directory     2. Receives COCA mass email

**Your Message** for The Directory (max 30 words): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

N.B. Be sure to **check the category** in which your message will appear (see page 2).

**How did you hear about COCA** (or who referred you)? \_\_\_\_\_

**References:** If you have not been a member of COCA for more than 4 years, you must submit the names of two (2) references with this Renewal form. Please list references below. **Print:** Name / Company / Telephone / Email

1. \_\_\_\_\_
2. \_\_\_\_\_

Annual Associate Fee for Companies CAD \$ 335.00  
 (includes Web link from COCA site)

Extra Directory Categories: \_\_\_\_ @ \$25 + \_\_\_\_\_  
 (see page 2)

Please make cheque payable to:  
**“Canadian Org’n of Campus Activities”**  
 and return to:  
**COCA**, 509 Commissioners Rd. W., Suite 202  
 London ON N6J 1Y5

**Sub Total** CAD \$ \_\_\_\_\_

**Add: Federal / Ontario HST tax** + 13% \_\_\_\_\_ **(Sorry – this tax is not optional!)**

**Total** CAD \$ \_\_\_\_\_ (HST # 87208 5493 RT0001)

**N.B.** If you are submitting this form along with a **Conference Registration Form**, transfer “Subtotal” above (before tax), to the Membership Fees line of the Associate Conference Registration Form. HST will be added on that form.

# COCA On-Line Directory

## Listing Categories For

### COCA Associates – Companies

Page 2 of 2

Please **check one (1) category** below which is your FREE category listing in COCA's on-line Directory. The Directory is accessible by COCA members only.

If you wish to be listed under more than 1 category, you may add a 2<sup>nd</sup> and 3<sup>rd</sup> category at a cost of \$25 each. Simply **check one (1) or two (2) additional categories** under which your listing will appear. These additional listings must be paid in advance. (Please add \$25 for each additional listing to the Fees Section on page 1 of this form.)

- Agencies & Artist Management
- Artists – Bands
- Artists – Classical & Jazz
- Artists – Comedy
- Artists – Performing Arts (theatre, dance, etc.)
  
- Artists – Singer / Songwriter
- Artists – Solo & Duo
- Artists – Variety
- Artists – Visual
- Associations & Music Industry Organizations
  
- Communications
- Film
- Food, Beverage & Misc.
- Games
- Lecturers, Trainers, Keynote Speakers
  
- Media – Print & Electronic
- Merchandise & Promotional Products
- Record Companies
- Services – Computers
- Services – Consultants
  
- Services – Event Supplies
- Services – Financial
- Services – Printing & Office Supplies
- Sound, Lights, Special Effects & Staging
- Special Events
- Travel

#### Name of Person Completing this Form

\_\_\_\_\_

(Name)

\_\_\_\_\_

(Title/Position)

\_\_\_\_\_

(Today's Date)

**Note 1:** Both pages 1 and 2 of this form must be completed and sent with payment. Thank you.

**Note 2:** If you are paying by **credit card**, please complete the **credit card authorization form** and fax or mail it with this application.

**Note 3:** If you are submitting this form along with a **Conference Registration Form**, please transfer "Subtotal" above (before tax), to the Membership Fees line of the Associate Conference Registration Form. HST will be added on that form.

**Tel:** 519-690-0207 **Fax:** 519-681-4328 **Web:** www.coca.org **Email:** via website "Contact"

**(P.T.O.) ►**