



British Columbia
& Yukon

JOB POSTING PAYMENT FORM

Date: First Name: Last Name:

Company:

Address:

City: Prov: PC:

Telephone: Fax: E-mail:

- Corporate Member Rate @ \$475.00
- Member Rate @ \$525.00
- Non-Member Rate @ \$650.00

Note:
Your employer will be invoiced, unless you request otherwise or you are an independent consultant. Your organization qualifies for a member rate if any of your employees are members of CPHR BC & YK.

Please complete the following information. A receipt will be issued.

<input type="radio"/> VISA	Advertising Fee	<input type="text"/>
<input type="radio"/> AMEX	GST/HST	<input type="text"/>
<input type="radio"/> MasterCard	Total Charge	<input type="text"/>
<input type="radio"/> Cheque Payable to CPHR BC & YK		

Please calculate GST/HST at the rate in effect in your location. Purchasers located outside of Canada are not subject to tax. Reg #119446714

I agree with the above charges. In the event my credit card is declined for any reason, I understand I will be charged an additional processing fee of \$30.00. Please charge my credit card the Total Charge indicated above.

Name on Card: Credit Card #:

Expiry Date:

Signature: