

Regular Freight Forwarder's Membership Application Form

Regular Membership Application Mandatory Qualifications Checklist

<ul style="list-style-type: none"> Have been in business for a minimum of 36 months; 	
<ul style="list-style-type: none"> Carry on business and maintain business premises in Canada as International Freight Forwarders. (Refer to CIFFA Bylaw, Section 1, a, for specific details. (http://www.ciffa.com/about_bylaws.asp); 	
<ul style="list-style-type: none"> Is not in any manner related to, subsidiary to, or owned in whole or in part by any shipper, exporter, or importer of goods nor any person who buys or sells goods or acts as a buying or selling agent on behalf of merchants or shippers in any manner shall be eligible for CIFFA Regular membership unless the person submits materials with their application that persuades the board, in its sole discretion, that the applicant's freight forwarding business is operated independently and at arm's length from the related shipper; (Refer to CIFFA Bylaw, Section 1, a, i, for specific details. (http://www.ciffa.com/about_bylaws.asp); 	
<ul style="list-style-type: none"> Is not in any manner related to, subsidiary to, or owned in whole or in part by any carrier may be accepted for CIFFA Regular membership unless the person submits materials with their application that persuades the board, in its sole discretion, that the applicant freight forwarding business is operated independently and at arm's length from the related carrier; (Refer to CIFFA Bylaw, Section 1, a, ii, for specific details. (www.ciffa.com/about_bylaws.asp); 	
<ul style="list-style-type: none"> Sponsored by two current CIFFA Regular Freight Forwarding Member companies, whose membership is in good standing; 	
<ul style="list-style-type: none"> Maintain CIFFA Certificate trained staff or equivalent at each location; 	
<ul style="list-style-type: none"> Maintain trained dangerous goods personnel (air and/or ocean and/or road DG) for each location (if applicable); 	
<ul style="list-style-type: none"> Abide by the CIFFA Standard Trading Conditions as approved by the national membership, or Corporate Trading Conditions no less onerous than those of CIFFA; 	
<ul style="list-style-type: none"> Abide by the Association's requirement to secure, at the member's cost, Freight Forwarders Liability Insurance coverage as well as Errors and Omissions coverage with a minimum liability in the amount in Canadian currency of (\$500,000.00) five hundred thousand dollars per occurrence (such proof to be attached to application), and carrier's liability as may be assumed under a FIATA FBL or like contract of carriage issued in the Member's name, current proof of which will be forwarded annually to the Secretariat; 	
<ul style="list-style-type: none"> Agree to abide by CIFFA Code of Ethics. 	

CIFFA'S CODE OF ETHICS

Every CIFFA member pledges to abide by CIFFA's professional code of conduct which states:

- The CIFFA Regular Member must discharge its duties with honesty and integrity.
- The CIFFA Regular Member pledges a standard of competence to its client, to perform in a conscientious, diligent, and efficient manner services undertaken on the client's behalf.
- The CIFFA Regular Member pledges to hold in strict confidence all information acquired in the course of the relationship concerning the business and the affairs of its client. No such information is to be divulged unless authorized by the client, except as required by law.
- The CIFFA Regular Member agrees to observe all relevant laws of Canada regarding the movement of goods entrusted to it.
- The CIFFA Regular Member owes a duty to its client not to withdraw its services, except for good cause and upon appropriate notice.

Current CIFFA Regular Membership Fees* effective November 1, 2015

Freight Forwarding Locations	Fees*
One or more forwarding offices in one Province in Canada	\$1145.00
One or more forwarding offices in two Provinces in Canada	\$1645.00
One or more forwarding offices in three Provinces in Canada	\$2150.00
One or more forwarding offices in four or more Provinces in Canada	\$2545.00

New Members are granted membership in FIATA only at the start of each calendar year, January 1st.

***Membership fees are non-refundable and are subject to applicable tax(es).**

1. COMPANY INFORMATION

This firm hereby applies for Regular Membership in CIFFA, and requests that the persons listed hereafter be its representatives. If admitted, the firm and its representatives will be governed by the present and future By-Laws of the Association and the Code of Ethics, and undertake to pay such fees as may be properly authorized.

Date of Application: _____ Name of Firm: _____

Head Office Address: _____ City: _____

Province: _____ Postal Code: _____ No. of Locations: _____

Telephone: _____ Fax: _____ Toll Free: _____ Toll Free Fax: _____

General Email: _____ Website: _____

No. of Employees in
Canada: _____

Has the organization been operating a Freight Forwarding business in Canada for at least 36 months?

Y N

If no, please explain which exception you will be applying under. See the Regular Member New Applicant Exception Guidelines for more details.

2. COMPANY REPRESENTATIVES (All fields are mandatory – one person can fulfill more than one role)

Senior Officer:

Name	Title	Email
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Second Senior Officer:

Name	Title	Email
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Designated Representative:

Receives all the direct communications from CIFFA

Name	Title	Email
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Alternative Representative:

Name	Title	Email
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Web Editor:

Responsible for updating company contact information on the CIFFA website

Name	Title	Email
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HR Contact:

Responsible for registering employees for courses, updating eBulletin subscription, posting jobs to CareerConnect

Name	Title	Email
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Accounting Contact:

Contact person in your Accounts Payable Department responsible for processing invoices

Name	Title	Email
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NOTE:

- At least two senior contacts must be provided.
- Each firm may name two representatives, a Designated Representative and an Alternate Representative. Whilst both representatives may attend meetings etc., only one, the Designated Representative may vote. In the absence of the Designated Representative, the Alternate Representative may vote.

3. CORPORATION INFORMATION

Attach Articles of Incorporation with completed application.

Federal Incorporation Date: _____ Provincial Incorporation Date: _____

Shareholder Structure: *If owned by another legal entity a list of officers and/or directors is required with corresponding shareholder percentages of more than 5%. (Attach additional sheet if space is insufficient).*

ENTITY NAME: _____

ENTITY ADDRESS: _____

Name of Shareholder:	% owned	Name of Shareholder:	% owned	Name of Shareholder:	% owned	Name of Shareholder:	% owned

4. FINANCIAL INFORMATION

Was any principal of this organization a principal of an organization that declared bankruptcy in the past? Y N

If yes, please explain.

Has any principal of this organization ever been refused a bond? Y N

If yes, please explain.

5. LEGAL LIABILITY INSURANCE INCLUDING ERRORS AND OMISSIONS

Legal Liability as well as Errors and Omissions Insurance (min. CAD \$500,000.00 per each occurrence) - *Attach proof of insurance with completed application*

It is the responsibility of the CIFFA Member to supply proof of insurance on an annual basis.

Name of Insurance Company: _____ Policy Number: _____ Policy Expiry Date: _____

Name of Insurance Broker: _____ Email: _____

Telephone: _____ Fax: _____

6. APPLICATION SPONSORS

Note: This application must be sponsored by TWO CURRENT REGULAR FREIGHT FORWARDING CIFFA MEMBERS in good standing. The sponsors must be in a senior management position. Sponsors must have known the company for at least 24 months, and will be contacted by CIFFA for confirmation.

1ST Sponsor: _____ Title: _____
Name of Current CIFFA Regular Member employee

Member Company: _____ Email: _____

2ND Sponsor: _____ Title: _____
Name of Current CIFFA Regular Member employee

Member Company: _____ Email: _____

7. COMPANY FREIGHT FORWARDING LOCATIONS AND TRAINING COMPLIANCE FORM

PLEASE FILL OUT APPENDIX A FOR EACH FREIGHT FORWARDING LOCATION

8. GENERAL INFORMATION (Please provide the following information)

Are you a "Partners in Protection" (PIP) participant?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you a member of the Transport Canada Air Cargo Security Program?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you a CBSA freight forwarder with a CBSA 8000 forwarder code?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
If you wish to have your 8000 forwarder code posted on CIFFA website, provide it here: _____				
Is this a bonded 8000 code?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you an IATA Cargo Agent?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you a CASS Associate?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you a member of CSCB?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are you a member of AICBA?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>

9. HOW DID YOU LEARN OF CIFFA?

CIFFA Website Trade Magazine A Current CIFFA Member Other: Please Specify: _____

10. CANADIAN ANTI-SPAM LEGISLATION CONSENT

By completing this application and upon approval, the applying firm and its employees agree to receive emails and other forms of electronic communications from CIFFA which may include information such as: events, announcements, training information, and other messages related to the day to day business of membership with CIFFA. Please visit the CIFFA website to review our [Legal](#) and [Privacy](#) policies.

11. CIFFA PRIVACY STATEMENT

CIFFA's Mission is to represent and support members of the Canadian international freight forwarding industry in providing the highest level of quality and professional services to their clients. To achieve this mission, CIFFA focuses on Membership, Education and Advocacy – all of which require the collection and use of personal information. CIFFA respects an individual's right to privacy and makes every effort to ensure that information is protected. This privacy policy applies to all personal information provided to CIFFA. For CIFFA's complete Privacy Policy please visit www.ciffa.com/privacy.asp

12. APPLICANT FIRM AUTHORIZATION

Name of Company Official: _____ Title of Company Official: _____
Signature of Company Official: _____ Date: _____

13. MEMBERSHIP FEES & PAYMENT OPTIONS - PAYMENT MUST ACCOMPANY APPLICATION

Current CIFFA Regular Membership Fees effective November 1, 2015

**Membership fees are non-refundable and are subject to applicable tax(es)*

Freight Forwarding Locations	Fees*
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Please add applicable taxes for the province of head office location *(subject to change following provincial guidelines)*

Province	Tax Rate	Please add applicable taxes for the province of head office location (see left)	Membership Fees (see above):	
ON, NB, NL	13% HST		HST:	
NS	15% NSST		GST:	
PE	14% HST		NSST	
QC	5% GST + 9.975% QST		QST	
AB, BC, MB, NT, NU, SK, YUK	5% GST		Total Amount Due:	

Payment Options (please check one option)			
CIFFA Business Number: R122975436			
Payment Options:	<input type="checkbox"/> Cheque	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
Name of Cardholder:			
Card Number: (no spaces)			
Security Code: (3 or 4-digit number on back of card, front of card for AMEX)			
Expiry Date: (mm/yy)			
Signature of Cardholder:			

Make cheque payable to: CIFFA, 480 - 170 Attwell Drive, Toronto, ON M9W 5Z5

(Please attach application if mailing.)

FOR OFFICE USE ONLY

Credit Card Authorization No.: _____ Date Processed: _____ Initials: _____
 Date Application Approved: _____

APPENDIX A

REGULAR FREIGHT FORWARDER'S MEMBERSHIP COMPLIANCE INITIATIVE FORM

- Every member must be responsible for meeting Transport Canada's requirements that there be trained personnel at each location where shipping of dangerous goods cargo takes place by air and/or ocean. If your company deals with air and/or ocean dangerous goods, please provide at least one (1) name of the trained personnel for each branch;
- Even though the company does not handle dangerous goods, a general awareness of dangerous goods handling must be demonstrated. CIFFA Certificate in International Freight Forwarding (which includes general awareness training), CIFFA Handling of Dangerous Goods by Road certificate or evidence of other dangerous goods general awareness training are accepted;
- Every member must maintain CIFFA Certificate trained staff or equivalent at each location;
- Submission of certificates of trained individuals in each member branch location is required at the time of application.

Fill out the following form for each location

Company Name: _____

Location Address: _____ City: _____ Province: _____

Postal Code: _____ Phone: _____ Fax: _____

Primary Contact: _____
Name Title Email

Secondary Contact: _____
Name Title Email

No. of Employees at this location: _____

Does this location conduct international freight forwarding operations? Y N **If Yes, fill out the rest of the application.**

Complete this form (Appendix A) for each location conducting freight forwarding business.

Provide name(s) of least one (1) trained staff with a CIFFA certificate or equivalent training at this location. _____

- A. Is outbound air cargo handled at this location? Y N
- B. Does this location handle air dangerous goods shipments? Y N
If Yes, provide name(s) of at least one (1) trained staff. _____
- C. Does this location handle ocean dangerous goods shipment? Y N
If Yes, provide name(s) of at least one (1) trained staff. _____
- D. If you answer **NO** to questions B and C, and if there is no trained staff with a CIFFA certificate, it is **MANDATORY** to have a trained staff in DG General Awareness or Road Dangerous Goods.
Please provide name(s) of at least one (1) trained staff. _____

Copies of certificates required if NOT issued by CIFFA

Non-freight forwarding locations can be added to the CIFFA website by the Web Editor after the application has been approved.