



Registration Form

Company Name: _____

Contact: _____

Position: _____

Specify:

- | | |
|---|---|
| _____ Independent | \$200. - \$500. |
| _____ Chain Stores (4) | \$400. - \$1000. No. of Locations: _____ |
| _____ Chain Store
(More than 4) | \$1000. - \$5000. No. of Locations: _____ |
| _____ Appraisers | \$200. - \$500. |
| _____ Refiners | \$1000. - \$5000. |
| _____ Manufacturers | \$500. - \$2500. |
| _____ Distributors | \$500. - \$2500. |
| _____ Associations/Industry Services - Individually | |

Address: _____

City: _____ Prov. _____ Postal _____

Phone: _____ Fax _____

Email: _____

Cheque _____ Visa _____ MC _____ Amex _____

Card Number: _____ Expiry: _____

Cardholder Name: _____

Signature: _____

Please complete and return with payment to:

**Jewellers Vigilance Canada, Suite 600. 27 Queen Street East,
Toronto, Ontario M5C 2M6 or fax to 416-368-5552.**