



Canadian Association of Technical Accident  
Investigators & Reconstructionists

**MEMBERSHIP RENEWAL** (Expires Dec 31, 2010)

Send Correspondence to: Home  Work

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Information Same as Last Year:**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov/State/Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Business phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov/State/Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Home phone #: \_\_\_\_\_

E mail address: \_\_\_\_\_

2009 Basic Membership fee **	\$ 55.00	<input type="checkbox"/>
Accident Reconstruction Journal (ARJ) (6 issues)	\$ 55.00	<input type="checkbox"/>
Impact (3 issues)	\$ 35.00	<input type="checkbox"/>

Total Amount Due This Invoice \$ \_\_\_\_\_

**\*AIQ & ARJ issues are for the publication year – NOT the Membership Year**  
***Cheque should be payable to C.A.T.A.I.R. (in Canadian funds)***  
**Due December 31, 2009**

**Send payment direct to:** Terry Lolacher  
8426 – 94 Avenue  
Fort Saskatchewan, AB, Canada T8L 2R6

Or Pay by Credit Card Payment: Visa and Mastercard accepted at this time

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_  
(I authorize CATAIR to charge my account for the fee as indicated.)

Do you want to receive correspondence from CATAIR through e-mail? Yes \_\_\_ No \_\_\_

Do you wish to have your e-mail on our web-site directory? Yes \_\_\_ No \_\_\_

Do you want to receive information by e-mail from related organizations? Yes \_\_\_ No \_\_\_

**Have you included your “Web Site” update form?(Required for Website listing)**  
**RETURN THIS FORM WITH YOUR PAYMENT**

## **CATAIR WEBSITE UPDATE - 2010**

**DUE TO PRIVACY LEGISLATION, THIS FORM MUST BE SUBMITTED FOR WEBSITE LISTING/ACCESS.**  
In order to better serve our members, CATAIR has increased the amount of data provided in each member's web site listing. However, due to the different backgrounds of our members, we understand that some individuals may want only limited data listed. Please fill out the following form with ONLY the data you would like listed on the CATAIR website, in the format you would like it listed. Enter as much or as little as you wish.

Once your information has been posted to the website, it will be up to the individual member to keep his or her listing up to date. This will reduce the number of updates we have to send to our website provider for such things as changes in email address, etc. Each member will initially be assigned a user ID and password. The password can be changed by the member once access has been made. After the deadline for each year's renewal has passed, those members who have not paid their dues will have their listing removed from the website.

**IF YOU DO NOT FILL OUT THIS FORM YOUR NAME WILL NOT BE LISTED ON THE WEBSITE & ACCESS TO MEMBERS AREA WILL NOT BE POSSIBLE**

### Web Site Data

Title: \_\_\_\_\_ First Name: \_\_\_\_\_  
*(i.e. Mr., Mrs., Ms., Dr., Cpl., Sgt., etc.):*

Middle Name or Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Information Same as Last Year:**  *(If yes, please make sure to write your name on the form)*

Position \_\_\_\_\_  
*(i.e. Traffic Analyst, Reconstructionist, Engineer, etc.):*

Company/Organization Name: \_\_\_\_\_

Company/Organization Address: \_\_\_\_\_

\_\_\_\_\_  
*City Province Country*

Company/Organization Website: \_\_\_\_\_

Email Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Fax: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Areas of Specialization (3 maximum):

1/ \_\_\_\_\_

2/ \_\_\_\_\_

3/ \_\_\_\_\_

Private Practice: Yes  No  CATAIR Member Since: \_\_\_\_\_