



NAABA Full Membership Application Form

Suite 100-425 Gregoire Drive
P.O. Box 5993, Fort McMurray, AB T9H 4V9
Phone: (780) 791-0478 Fax: (780) 714-6485
Email: naaba@telus.net

Full Membership Definition:

"Full Member" means an Aboriginal Business carrying on its business in the Wood Buffalo Region which meets the qualifications of membership as set out in NAABA's bylaws at Articles 6 and has been approved by the Board as a Full Member. (See third page for more details.)

Membership Information:

Company					
Owner					
Address					
City		Province		Postal Code	
Phone	(780)	Fax	(780)	Cell	
Email					
Web Site			Unionized	Yes/No	

If not the same as above, please complete the following:

Contact					
Address					
City		Province		Postal Code	
Phone	(780)	Fax	(780)	Cell	
Email					
Web Site			Other contact info		

Please complete the following:

Do you want faxes?	Yes/No	Do you want emails?	Yes/No	Do you want Work Opportunity emails?	Yes/No
Circle one of the following: First Nation, Metis, Inuit, Region or Band					
What is the name of your First Nation?					
If not First Nation, what is the name of the group that you belong to?					
Choose One: Membership Rates based on Full Time Equivalent (GST included in the rates)	Over 25 Employees = \$1050	Between 10-24 Employees = \$525	Under 10 Employees = \$210	2 nd Company (Non Voting) = \$105	
RMWB Bus Lic. # (Req'd):			GST Registration #		
Year Est. /Incorporated:					
Indicate safety program(s) you have:	ISNetworld	Canquai	COR	HSE	
Specify other programs					
List any other information:					

1. In addition to your ownership percentage, please provide a rough estimate of the number of Aboriginal persons employed by your company and your use of Aboriginal subcontractors in the performance of your contracts (use a typical annual average):

Category	Aboriginal	Non Aboriginal
Ownership	%	%
Employees	%	%
Sub Contractors	%	%

2. Please provide details on any training or apprenticeship programs that your company adheres to that would be of benefit to Aboriginal Business and persons in the Regional Municipality of Wood Buffalo.

3. Does your company have any association or joint venture with any local or local aboriginal companies in the Regional Municipality of Wood Buffalo? If so please provide names of the associate, or joint venture company:

4. Please visit <http://www.naaba.ca/Search/search.php> to look at the commodity list, please choose three that best describe your business.

We hereby commit to the employment of Aboriginal Peoples, support local Aboriginal Businesses and entities, and to abide by the By-laws, Policies, and Procedures, and Support the Mandate of the Northeastern Alberta Aboriginal Business Association. The undersigned is a duly authorized signing authority for the above entity, empowered to certify that the information provided is true and accurate.

I have attached (1) a copy of my RMWB business license or letter from First Nation (2) proof of Aboriginal identification (3) corporate documents that illustrate shareholder structure and ownership.

Signed: _____

Dated: _____

Print Name: _____

Once your application has been reviewed and accepted by NAABA's Board of Directors you will receive a membership invoice, membership package and a letter confirming your approval. If your application is not completed and/or the Board of Directors require further information you will be contact by NAABA's adminstration. We thank you for your time and commitment.

Please read the two following sections for definitions, clarifications and interpretations. The following information may be utilized as a checklist for your application. If you have any questions, please contact the NAABA office to book an appointment with the General Manager.

Application Checklist:

Proof of Aboriginal Status

A photocopy of Indian Status, Metis status card, Inuit status card or a letter from your First Nation identifying your Aboriginal status.

Proof of Controlling Ownership of 51% or more

- “Aboriginal Business” means a sole proprietorship, partnership, trust, organized group or community owned and controlled primarily by Aboriginal persons including First Nations and includes an Aboriginal Corporation and an Aboriginal Limited Partnership.
- “Aboriginal Corporation” means a Corporation:
 - Incorporated under the laws of a province of Canada or under the Canada Business Corporation Act, registered to carry on business in Alberta;
 - Legally and beneficially Controlled by one or more Aboriginal persons or First Nations;
 - Where the shareholders do not have a shareholders’ agreement in place which decreases or diminishes the Control of the Aboriginal person or First Nation.
- “Aboriginal Limited Partnership” means a limited partnership registered in the Province of Alberta and of which:
 - no less than fifty one percent of the units of each class of the limited partners are owned by, or the profits of the limited partnership are payable to an Aboriginal Person, one or more First Nations or an Aboriginal Corporation; and
 - the General Partner is an Aboriginal Corporation
- Control means when applied to the relationship between a person and a corporation, the beneficial ownership by the person, at the relevant time, of shares
 - Which carry more than 50% of the voting rights ordinarily exercisable at meetings of shareholders; and
 - The voting rights carried by such shares are sufficient, if exercised, to elect a majority of the directors of the corporation

Proof of local staffed office

- RMWB business license
- Letter from First Nation identifying that business is operated on a First Nations reservation
- If cannot provide either of the two above: legal land description from Annual Return or Power Bill

Interpretations

- 2010-01 The interpretation of the phrase “carrying on its business in the Wood Buffalo Region” in section 4.p. of the Bylaw shall mean that the Aboriginal Business applying for membership has:
- a) its head office established in the Regional Municipality of Wood Buffalo; and either
 - b) the aboriginal owner(s) currently resides within the Regional Municipality of Wood Buffalo and has for a minimum of one year;
- or-
- the business currently has an operational office in the Regional Municipality of Wood Buffalo and has for a minimum of one year.
- 2010 -02 For the purpose of Interpretation Guideline 2010-01 the following shall be considered:
- “Head office” shall means the location where most, if not all, of the important functions of an Aboriginal Business are coordinated and carried out - including such functions as central administration and accounting, long term decision making, central computer systems, senior management is primarily located, the mailing address for payment of accounts.
- “Operational Office” means a location where the Aboriginal Business carries on its business and where some functions are carried out.
- In deciding whether an office of an applicant is an Operational Office or a Head Office the opinion and decision of the Board of NAABA shall be final
- 2010-03 An applicant to be a Full Member of NAABA which is a joint venture shall be qualified to be a Full Member if the applicant is owned and Controlled (as defined in the Bylaw of NAABA) by an Aboriginal Business and the applicant satisfies the requirements of section 6 of the Bylaw of NAABA.
- 2010-04 Where an applicant to be a full Member of NAABA is unable to provide documentation to satisfactorily prove to the Board of NAABA that it qualifies for membership a sworn (affirmed) declaration by the applicant or in the case of a First Nation owned company a First Nation Band Council Resolution may in the sole discretion of the Board of NAABA serve to satisfy the documentary requirement.
- 2010-05 Proof of Aboriginal Status in the case of:
- “First Nation” is a First Nation Status card from the Government of Canada or a letter on band letterhead, signed by a current representative of that First Nation, i.e.: Chief, Membership clerk, and/or CEO.
- “Metis” is a registered provincial Metis card or a letter on provincial letterhead, signed by a current Metis authority, i.e.: President and/or Membership clerk.