



Membership in the Canadian Society for Industrial Security provides:

1. *A CANADIAN national forum where views, programs, projects, activities, events and research initiatives come together to help create, influence or change security and related legislation, regulations, standards, policy and operating procedures;*
2. *The opportunity to be actively involved in the development and future of security professionals in CANADA;*
3. *The opportunity to attain full ACCREDITATION as a professional security officer, in Canada;*
4. *A Canadian national network of security professionals creating a “help-line” for members; an annual Membership Directory on-line.*
5. *The opportunity to apply, at reduced rates, for Certification and other CSIS professional development programs;*
6. *An annual opportunity to attend, at reduced rates, a CANADIAN national seminar, bringing together the people, products and information which are directly pertinent to your profession; and*
7. *Attend, at reduced rates, local chapter meetings where the members in your area gather to discuss issues.*
8. *a free subscription to Canada’s leading security publications: Canadian Security Magazine and Security Matters.*

CODE OF ETHICS

AS MEMBERS of this Society we share the responsibility for maintaining the integrity and trust of the security profession in discharging this responsibility, therefore, we agree that:

I

We will observe the principles and standards of excellence in the performance of our professional duties.

II

We will support our lawful institutions to the best of our ability.

III

We will be impartial and fair in the discharge of our duties in keeping with ethical practices.

IV

We will observe the precepts of truth and accuracy.

V

We will respect and protect confidential and privileged information.

VI

We will promote programs and systems to raise the standards of the security profession.

VII

We will work toward the achievement of the professional objectives of the Society.

CORPORATE MEMBERSHIP APPLICATION

CATEGORIES:

() **CORPORATE (transferable)**

() Level 1 –Annual dues: \$ 550.00 (up to five members) **Initiation fee: \$100.00 TOTAL: \$ 682.50**

() Level 2 –Annual dues: \$1,100.00 (up to ten members) **Initiation fee: \$150.00 TOTAL: \$1,312.50**

NOTE: Total price includes GST.

All applications must be fully completed for proper processing and payment must be included with this application.

COMPANY INFORMATION :

CONTACT PERSON: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY: _____ PROVINCE/STATE: _____ POSTAL CODE: _____

Telephone: () _____ Fax: () _____

Preferred Language of Correspondence: English French

DECLARATION

I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. The appropriate payment is attached and will be returned if membership is not approved. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.

Signature of Company Representative

METHOD OF PAYMENT: Cheque American Express VISA Mastercard Money Order

CARD # _____ - _____ - _____ - _____ EXPIRY DATE: _____

TO EXPEDITE PROCESSING, RETURN THE FULLY COMPLETED APPLICATION WITH PAYMENT TO:

NOTE: If applying for a Level 1 Corporate Membership, please only complete sections for 5 applicants. Thank You.



The Canadian Society for Industrial Security Incorporated
Société canadienne de la sûreté industrielle incorporée
P.O. Box 57006, Jackson Station, 2 King Street West,
Hamilton, Ontario L8P 4W9
TEL: Toll Free (800) 461-7748 (905) 853-6523
FAX: (905) 972-0404

Courrier électronique / E-mail: inquiries@csis-scsi.org
Site Internet / Home Page: www.csis-scsi.org

(FOR COUNCIL USE ONLY)

ENDORSEMENT:

(Region/Chapter Administration)

(Date)

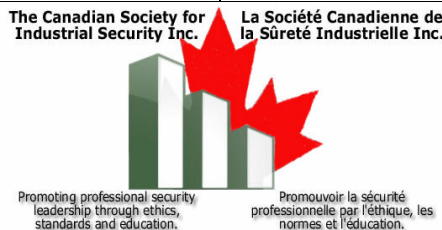
(National Administration)

(Date)

APPLICANT INFORMATION :

- Note: i) A character reference that can be contacted by CSIS, Inc. is required for each applicant.
 ii) A signature for each applicant is required.

Applicant 1		Applicant 2	
Full Name		Full Name	
Company Title		Company Title	
Designations		Designations	
Telephone		Telephone	
Fax		Fax	
Email		Email	
Full Name of Reference		Full Name of Reference	
Title of Reference		Title of Reference	
Telephone Num. of Reference		Telephone Num. of Reference	
Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?	Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?
DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.		DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.	
_____ Applicants Signature		_____ Applicants Signature	



(FOR COUNCIL USE ONLY)
ENDORSEMENT:

 (Region/Chapter Administration)

 (Date)

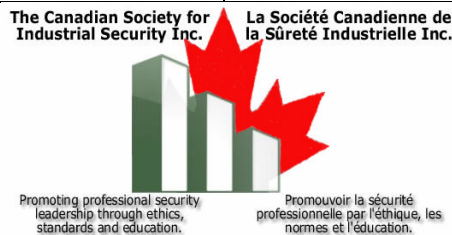
 (National Administration)

 (Date)

APPLICANT INFORMATION :

- Note: i) A character reference that can be contacted by CSIS, Inc. is required for each applicant.
 ii) A signature for each applicant is required.

Applicant 3		Applicant 4	
Full Name		Full Name	
Company Title		Company Title	
Designations		Designations	
Telephone		Telephone	
Fax		Fax	
Email		Email	
Full Name of Reference		Full Name of Reference	
Title of Reference		Title of Reference	
Telephone Num. of Reference		Telephone Num. of Reference	
Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details) ...for which a pardon has not been granted?	Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?
DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.		DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.	
_____ Applicants Signature		_____ Applicants Signature	



(FOR COUNCIL USE ONLY)
ENDORSEMENT:

 (Region/Chapter Administration)

 (Date)

 (National Administration)

 (Date)

APPLICANT INFORMATION :

- Note: i) A character reference that can be contacted by CSIS, Inc. is required for each applicant.
 ii) A signature for each applicant is required.

Applicant 5		Applicant 6	
Full Name		Full Name	
Company Title		Company Title	
Designations		Designations	
Telephone		Telephone	
Fax		Fax	
Email		Email	
Full Name of Reference		Full Name of Reference	
Title of Reference		Title of Reference	
Telephone Num. of Reference		Telephone Num. of Reference	
Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?	Have you ever been convicted of a criminal offense.....	Yes _____ No _____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?
DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.		DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith.	
_____ Applicants Signature		_____ Applicants Signature	



(FOR COUNCIL USE ONLY)
ENDORSEMENT:

_____ (Region/Chapter Administration)

_____ (Date)

_____ (National Administration)

_____ (Date)

APPLICANT INFORMATION :

- Note:**
- i) A character reference that can be contacted by us is required for each applicant.
 - ii) A signature for each applicant is required.

Applicant 9		Applicant 10	
Full Name		Full Name	
Company Title		Company Title	
Designations		Designations	
Telephone		Telephone	
Fax		Fax	
Email		Email	
Full Name of Reference		Full Name of Reference	
Title of Reference		Title of Reference	
Telephone Num. of Reference		Telephone Num. of Reference	
Have you ever been convicted of a criminal offense.....	Yes_____ No_____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?	Have you ever been convicted of a criminal offense.....	Yes_____ No_____ (If yes, please provide explanation on a separate sheet outlining the details)for which a pardon has not been granted?
DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith. _____ Applicants Signature		DECLARATION I have read the Code of Ethics and hereby agree to abide by them as well as the By-Laws and Constitution. I authorize the verification of all information in this application and release all concerned from any liability in connection herewith. _____ Applicants Signature	

P.O. Box 57006, Jackson Station, 2 King Street West, Hamilton Ontario L8P 4W9
 Tel: (905) 853-6523 / Toll Free: (800) 461-7748 Fax: (905) 972-0404
 Email: inquiries@csis-scsi.org / Web: www.csis-scsi.org

(FOR COUNCIL USE ONLY)
ENDORSEMENT:

 (Region/Chapter Administration)

 (Date)

 (National Administration)

 (Date)