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ADDENDUM TO MEMBERSHIP APPLICATION

The undersigned is recognized as the owner of this membership. Only the undersigned may add or delete additional signatures which can transact business within the membership.

Name of Membership

CLA Member #

List below any additional persons authorized to do business for the membership. (If changes occur, please advise).

Name of additional authorized signer (please print)

Signature

Name of additional authorized signer (please print)

Signature

Name of additional authorized signer (please print)

Signature

Dated this ____ day of _____, 20____

Signature of Membership holder