



Denturist Association of Canada  
DACnet™ Renewal Form

**PLEASE SUBMIT THIS FORM WITH YOUR DACnet RENEWAL PAYMENT**

No change

OR

Indicate changes below

Denturist Name : \_\_\_\_\_

Clinic Name : \_\_\_\_\_

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

City : \_\_\_\_\_

Province : \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone : \_\_\_\_\_ Fax \_\_\_\_\_

Office email : \_\_\_\_\_

Denturist email : \_\_\_\_\_

Software Supplier : \_\_\_\_\_

I am a member of my Provincial Association : YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, please indicate which Provincial Association of The DAC:

---

---

The DAC Member Renewal Fee \*- \$ 150.00 CDN **plus GST or HST**

*\* A member in good standing of a provincial or territorial Denturist association which is a member of The Denturist Association of Canada*

Non-Member Renewal Fee- \$ 650.00 CDN **plus GST or HST**

**GST or HST rates**  
**5 %:** Alberta, British Columbia, Manitoba, Quebec, Saskatchewan, Yukon, Northwest Territories and Nunavut  
**13 %:** Ontario  
**15 %:** New Brunswick, Newfoundland, Nova Scotia and Prince Edward Island

You may also send your renewal form by fax or by email.

FAX : 1-613-902-2840  
EMAIL : dacnetedi@gmail.com

**SUBSCRIPTION FEE**

(Annual Subscription fees are payable for each Denturist to be registered.)

**Subsequent years –**

The DAC Member\* - \$150.00 CDN plus GST/HST  
 Non-Member - \$650.00 CDN plus GST/HST

<b>Provincial GST/HST Table</b>	
Alberta, British Columbia, Manitoba, North West Territories, Nunavut, Saskatchewan, Quebec & Yukon	5%
Ontario	13%
New Brunswick, Newfoundland, Nova Scotia and Prince Edward Island	15%

*\* A member in good standing of a provincial or territorial Denturist association which is a member of The Denturist Association of Canada.*

*Note: The first renewal year following a lapsed subscription will be considered Year One/Start Up year and appropriate Start Up fees will apply*

**PAYMENT ENCLOSED**

<b>Renewal Year</b>	<b>Principle Cost</b>	<b>GST/HST</b>	<b>Total</b>	<b>Payment Enclosed</b>
The DAC Member*	\$150.00			
Non-Member	\$650.00			

- Enclosed is my cheque in Canadian funds, payable to The Denturist Association of Canada.
- Payment is by credit card (complete information below)

\_\_\_\_\_ Expiry date  
 \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Cardholder \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_

**MAIL, FAX OR EMAIL APPLICATION, INCLUDING PAYMENT TO:  
 DACnet™**

**66 Dundas Street East  
 Belleville, Ontario K8N 1C1  
 Telephone: 613-968-9467 / 1-877-538-3123  
 Fax: 613-902-2840  
 Email: [dacnetedi@gmail.com](mailto:dacnetedi@gmail.com)**