



MedicalTAX inc.

www.medicaltax.ca

1403B – 2nd St SW

Calgary, AB, T2R 0W7

ph: 403-228-7825

fax: 403-228-7925

CORPORATE APPLICATION FORM

Corporation's Legal Name: _____

Operating As: _____ Business Type: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Bus No.: _____ Fax No.: _____

E-mail: _____

First Contact Person

Name: (First)	(Last):
Ph No.:	Fax No.:
Email:	
Position:	

Second Contact Person

Name: (First)	(Last):
Ph No.:	Fax No.:
Email:	
Position:	