

MULTI-MEMBERSHIP RENEWAL /RENOUVELLEMENT DE L'ADHESIONA PLUSIEURS

Program/ Programme OR
Organization/Organisation:

Address/adresse:

City/ville Province/État Postal code /code postal Country/pays

Telephone/numéro de téléphone: EXT.:

Fax/Télec.:

NAME/NOM	CAT.	FEES/PRIX
<i>*Please fill out the new member form for anyone who has not been a CACPR member in the past</i>		
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Name/nom:

**Membership Categories
Catégories de membre**

A. Regular/titulaire
Professionals regularly involved in CR
 1 year \$150+tax
 2 year \$300+tax
 3 year \$450+tax

B. Associate/affilié
Professionals interested in CR but not eligible as a regular member
 1 year \$150+tax
 2 year \$300+tax
 3 year \$450+tax

C. Student/étudiant
Individuals enrolled in post-secondary studies related to CR. Includes a copy of the 3rd Edition Guidelines.
 1 year \$75+tax
 2 year \$150+tax
 3 year \$225+tax

D. Retired/retraité
Members in CR who have retired and wish to continue to support CACPR activities
 1 year \$60+tax
 2 year \$120+tax
 3 year \$180+tax

E. International
Professionals involved or interested in CR living outside of Canada
 1 year \$180+tax
 2 year \$360+tax
 3 year \$540+tax

Taxes: 13% HST
ON,NB,NL, 15% HST
NS, 12% HST
BC, 5% GST
AB,MB,NT,NU,PE,QC,SK,YT
TOTAL \$

METHOD OF PAYMENT/MODE DE PAIEMENT:

Cheque or PO/Chèque ou Mandat Postal: _____

VISA MC AMEX

CardHolder Name/Nom de détenteur de la carte:

Card # / No. De la carte :

Expiration: / Security code:

Total: _____