



British Columbia Art Therapy Association
 #101 - 1001 West Broadway, Dept. 123
 Vancouver, B.C. V6H 4E4 www.bcarttherapy.com

NEW MEMBERSHIP APPLICATION 2010/2011

Check one ↓	Membership category	Yearly Dues (Renew every April 30)
	Registered Professional	\$100.00
	Professional Member	\$100.00
	Associate Member	\$ 60.00
	Retired Member	\$ 40.00
	Student Member	\$ 20.00

- Please be sure to include all supporting documentation for your membership category, as listed under “Membership Requirements” on the BCATA website: www.bcarttherapy.com
- Student members, please send a photocopy of your student card or confirmation letter from your school.

Date: _____ (office use) Membership # _____ Receipt# _____

NAME: _____

MAILING ADDRESS: _____

City/town _____ Postal Code _____

PHONE: (Home) _____ (Business) _____

E-MAIL: _____ WEB: _____

***** IMPORTANT: BCATA BYLAW REQUIREMENT (Bylaw 4.2.b and 4.3.b)**

Once you become a practicing PROFESSIONAL or REGISTERED PROFESSIONAL member, You will need to sign to indicate that you have PROFESSIONAL LIABILITY INSURANCE COVERAGE:

BCATA carrier (once in Good Standing) Employer Other Signature: _____

If you are a RETIRED member, please sign here indicating that you are no longer practicing art therapy but wish to remain a member and keep your BCATA membership in Good Standing.

Signature: _____

Check here if you would like to do your part and become an active part of the Association in any one of these areas: Newsletter Membership Ethics Professional Development Other: _____

Please make your check payable to: **BC Art Therapy Association**

Mail to: New BCATA Membership, #101 – 1001 West Broadway, Dept. 123, Vancouver, BC, V6H 4E4

THANK YOU FOR SUPPORTING THE BCATA-With dues and documentation in order you are in GOOD STANDING

For membership inquiries please email: bcata.membership@gmail.com