



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

NEW MEMBERSHIP APPLICATION 2009/2010

•For new applications, please be sure to include all supporting documentation for your membership category, as listed under “Membership Requirements” on the back of this form.

Date: _____

Check one		Fees renewed annually before April 30, 2009
<input type="checkbox"/>	Registered Professional Member	\$100.00
<input type="checkbox"/>	Professional Member	\$100.00
<input type="checkbox"/>	Student Member	\$20.00
<input type="checkbox"/>	Retired Member	\$40.00
<input type="checkbox"/>	Associate Member	\$60.00

NAME: _____ Membership# _____ *Office use*

Mailing Address: _____

City/town _____ Prov. _____ Postal Code _____

PHONE: (Home) _____ (Business) _____

E-MAIL: _____ WEB SITE: _____

The newsletter will be sent to your e-mail address. If you would prefer to have a hard copy sent to your mailing address, please check here: Yes, I require a newsletter hard copy.

EDUCATION:

Art Therapy Training: _____ Year _____

Degree/University: _____ Year _____

Other Education: _____

* If you are a **Retired member**, please sign here to indicate that you are no longer practicing art therapy but wish to remain a member with the BCATA:
 Signature: _____

***** IMPORTANT: BCATA BYLAW REQUIREMENT (Bylaws 4.2.b and 4.3.b) *****
 If you are a practicing Professional or Registered professional member, please sign here to indicate that you have professional liability insurance covered by either;
 BCATA carrier Employer Other carrier Signature: _____

Topics you would like to see covered at Pro-D workshops: _____
 The BCATA is always looking for members to volunteer in various areas on the Board: President Secretary Ethics OR Newsletter Professional Development Other: _____

Please make checks payable to: **BC Art Therapy Association (BCATA)** and mail to the above address
 Any questions? Contact BCATA Membership Chair: Joanne Elliott, bcatamembership@gmail.com