

ANNUAL DUES - 2009

Please check the information below and enter any additions or corrections in the boxes at right.

Additions or Corrections: Name: Membership Category: Highest Degree: Certification: Specialty: **Professional Societies: Work Contact Information** Address: Telephone: Fax: e-mail: **Home Contact Information** Address: Telephone: Fax: e-mail: Preferred address for correspondence: Membership Renewal (please check appropriate boxes): \$20.00 Regular, Associate, or Retired: Student: \$10.00 I am paying by: cheque cash

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