



PROFESSIONAL MEMBERSHIP 2011 RENEWAL FORM

Membership Period: January 1 to December 31, 2011

Name _____
First Middle Last

Job Title: _____

Business Name: _____

E-mail: _____

Primary Contact: Residence Business *PLEASE PRINT and complete all areas.*

Residence Address	Business Address
Address: _____	Address: _____
City Province Postal Code: _____	City Province Postal Code: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____

Academic Achievements: Indicate the two highest degrees that you have obtained in your academic history:
 Certificate Diploma Bachelor Master Doctorate **Discipline:** _____

Areas of Specialization: Please only select two (2)

<input type="checkbox"/> Case Manager/Rehabilitation Service Coordinator	<input type="checkbox"/> Educator/Instructor	<input type="checkbox"/> Psychosocial Rehabilitation Specialty
<input type="checkbox"/> Community Support Specialist	<input type="checkbox"/> Employment Specialist	<input type="checkbox"/> Vocational Counsellor /Consultant
<input type="checkbox"/> Disability Manager/Consultant	<input type="checkbox"/> Forensic Assessor (Life Care Planner, Cost of Care Consultants, Future Cost Specialist)	<input type="checkbox"/> Rehabilitation Counsellor
<input type="checkbox"/> Other – Please specify: _____		

Professional Membership Fees – Pay by December 31 and save \$50!
 Early Bird Membership – Before December 31, 2010 \$325.00 Membership – After December 31, 2010 \$375.00
Fees appearing on this form are valid from January 1-December 31, 2011. Membership must be renewed annually. Memberships are non-transferable and non-refundable

Options

“Members Only” Website Directory No Charge
 I consent to having my name and mailing address listed in the “members only” section of the VRA Canada website.

External Database No Charge
 I consent to having my business information listed on VRA Canada’s website for non members seeking the services of a rehabilitation specialist. Please submit your business contact information and a 50–75 word summary of the services you provide to: info@vraCanada.com

Canadian Assessment Vocational Evaluation and Work Adjustment Society (CAVEWAS) \$50.00
 CAVEWAS is a national society of VRA Canada, dedicated to identifying and promoting issues relevant to vocational evaluation and career preparation/placement services.

Payment

Payment by cheque or money order (made payable to VRA Canada) *NOTE: A fee of \$25.00 will be charged on all NSF items.*

Payment by credit card: Visa MasterCard

Credit Card Number: _____ Expiry Date: _____

Signature: _____

Return this form with your payment	Mail with cheque to: 4 Cataraqui Street, Suite 310, Kingston, ON K7K 1Z7	Fax with credit card information to: 888-441-8002
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