

## Membership Application Form

### Personal Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth (yyyy/mm/dd): \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### Psychology Registration Information

College: \_\_\_\_\_ Registration Number: \_\_\_\_\_

College: \_\_\_\_\_ Registration Number: \_\_\_\_\_

College: \_\_\_\_\_ Registration Number: \_\_\_\_\_

### Home Address

Street Address: \_\_\_\_\_ Unit/Apartment #: \_\_\_\_\_

City/Town: \_\_\_\_\_ Country: \_\_\_\_\_

Territory/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### Work Address

Street Address: \_\_\_\_\_ Unit/Apartment #: \_\_\_\_\_

City/Town: \_\_\_\_\_ Country: \_\_\_\_\_

Territory/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

For correspondence, please use my:  home address  work address

## Other Information

Are you a member of the CPA?  Yes  No

Are you a member of any other professional associations?  Yes  No

If yes, please list: \_\_\_\_\_

I agree by indicating that I am member of any of these associations that I am consenting to information sharing for coordination / dual membership purposes.

In making this application, I subscribe and will support the objectives of the Psychological Society of the Yukon and to the Canadian Code of Ethics for Psychologists (revised 2017).

I acknowledge Psychological Society of the Yukon collects my personal information for specific requirements and functions related to membership and will not use my information for other purposes without my consent.

## Membership Fees

\$150 Full Member: Must be a registered psychologist in good standing with a college of Psychologists in North America and have practiced in the Yukon within the 12 month period preceding this application.

\$100 Full Member – Reduced Rate: Must be a provisionally registered psychologist in good standing with a college of Psychologists in North America and have practiced in the Yukon within the 12 month period preceding this application.

Payment can be made by either:

- Cheque made payable to *Psychological Society of the Yukon* and mailed to PO Box 31232 Whitehorse, YT, Y1A 5P7 or
- E-transfer sent to [psychologicalsocietyyukon@gmail.com](mailto:psychologicalsocietyyukon@gmail.com)

For more information, please email [psychologicalsocietyyukon@gmail.com](mailto:psychologicalsocietyyukon@gmail.com)

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### For Office Use Only

Membership Approved \_\_\_\_\_ Start Date: \_\_\_\_\_

Membership Number \_\_\_\_\_ Renewal Date: \_\_\_\_\_