



Occupational Therapy Society Initial Member Application Form

Membership Eligibility Criteria:

- 1) You live and/or work in the province of Prince Edward Island (PEI) **and**
- 2) You are employed as an occupational therapist in PEI and you are registered with the PEI Occupational Therapists Registration Board (PEIOTRB) or
- 3) You are not currently practicing as an occupational therapist (retired, on leave, studying, etc.) and were registered with the PEIOTRB in the past

Name:

Preferred Mailing Address: Home Work

Mailing Address:

Phone:

Email:

Employer (if applicable):

Eligibility Credentials: (check all that apply)

Occupational Therapy Diploma Bachelor Master's Clinical Master's Doctorate

Date Original Qualification Obtained: _____ School/Program: _____

Country: _____

 PEIOTRB License # _____

Initial Date of Registration: _____

Last Date of Registration (if retired or non-practicing): _____

Membership Fees

Practicing - Full Time (>800 hours per year)\$50.00

 - Part Time (<800 hours per year)\$35.00

Non-Practicing (unemployed, studying, parental leave, etc.)\$25.00

Associate (retired)\$10.00

Life\$0

Total submitted: _____ \$ _____

I am interested in volunteering Yes No

I consent to the communication of my information for society approved activities Yes No

I declare that the above information is correct and I agree to abide by the constitution and policies of the Prince Edward Island Occupational Therapy Society.

Date: _____ **Signature:** _____

Registration forms and fees can be forwarded to:

Manon Gallant, Physical Medicine Department, QEH, PO Box 6600, Charlottetown, PE C1A 8T5