



BCPS MEMBERSHIP APPLICATION 2017

CONTACT INFORMATION

Dr. Ms. Mr.

Name:

First

Last

Address:

City

Province

Postal Code

Office Phone:

Office Fax:

Home Phone:

Email:

MEMBERSHIP CATEGORY

Please check which category you wish to apply for:

<input type="radio"/> Active	A physician who has been duly certified as a specialist in the practice of pediatrics by the Royal College of Canada, or equivalent , and who is in active practice in the Province.	\$400
<input type="radio"/> Associate	A family physician who is in active practice in a field related to the provision of child health care <u>or</u> an allied health professional (e.g. specialists other than pediatricians who are in active practice in a field related to the provision of health care, or a nurse practitioner) <u>or</u> a pediatrician who is working less than 30 hours a week or is on leave.	\$150
<input type="radio"/> First Year of Practice	A physician who has been duly certified as a specialist in the practice of pediatrics by the Royal College of Canada, or equivalent , and who is in the first year of Practice	\$50
<input type="radio"/> Resident	A physician registered in a formal pediatric training program recognized by the Royal College of Physicians and Surgeons of Canada	Free!
<input type="radio"/> Retired	A person who has been a member in good standing and who has retired from the active practice of pediatrics	\$25

PAYMENT INFORMATION

There are two options for payment:

- 1) Please visit our website, <http://bcped.ca/Physicians/showcontent.aspx?MenuID=1827>, and pay online with a credit card.
- 2) Or you can mail this application, along with your cheque, to:

Stephanie Stevenson, Executive Director
 BC Pediatric Society
 Room 2D19, 4480 Oak Street
 Vancouver, BC
 V6H 3V4

