

CSCH Canadian Society of
Clinical Hypnosis BC
2012 MEMBERSHIP RENEWAL

We thank you for your interest in the C.S.C.H. and are sending you this form to complete so that your name will remain on the Membership List. Please indicate any changes you would like made (or indicate "no changes required" after your name) and return, **along with your cheque for membership dues, payable to "CSCH"**.

Canadian Society of Clinical Hypnosis (BC Division)
2036 West 15th Avenue, Vancouver, BC V6J 2L5

| NAME/ADDRESS/ PHONE/EMAIL | DEGREES | MEMBER TYPE | REFERRALS | SPECIALTY |
|------------------------------|---------|----------------|-----------|-----------|
| | | | | |

***NEW* - WOULD YOU LIKE THE ABOVE INFORMATION LISTED ON OUR WEBSITE FOR REFERRALS? (Available to Full members)** Yes or No

NEW - WOULD YOU LIKE YOUR WEBSITE ADDRESS LINKED WITH OUR WEBSITE
 Yes (if "yes", please provide website address) _____

DO YOU HAVE A MEMBERSHIP IN THE AMERICAN SOCIETY OF CLINICAL HYPNOSIS?
 Yes or No

I AM LICENSED OR CERTIFIED IN BRITISH COLUMBIA AS A:

| <u>Profession</u> | <u>License #</u> | <u>Profession</u> | <u>License #</u> |
|---------------------|------------------|-------------------|------------------|
| Physician | _____ | Social Worker | _____ |
| Dentist | _____ | Nurse | _____ |
| Psychologist | _____ | Marriage & Family | _____ |
| Registered Clinical | _____ | Therapist | _____ |
| Counsellor | _____ | Other | _____ |

| | | |
|--------------------------|-------|------------------------------|
| ANNUAL DUES: | \$110 | Full Membership |
| Jan.1/2011 - Dec.31/2011 | \$110 | Associate Membership |
| | \$110 | Special Affiliate Membership |
| | \$25 | Student Membership |

(Please check www.hypnosis.bc.ca for description of Membership Types.)

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT US AT: (604) 688-1714
www.hypnosis.bc.ca or email: admin@hypnosis.bc.ca

*****PLEASE RETURN AS SOON AS POSSIBLE*****