



Ozone Course Registration  
June 18th to June 19th, 2016

## Acupoint and Regeneration Injection Association of BC

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Name

Email address

Street address

Street address line 2

City

Province

Postal Code

Phone number

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### **Notes about individual membership privileges:**

Our members get priority registration to courses hosted by ARIABC

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### **Business Information**

Clinic Name

Street address

Street address line 2

City

Province

Postal Code

Phone number

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## Education Information

Designation

License Number

R.Ac

R.TCMP

Dr. TCM

Other

Did you complete an educational training course in Acupuncture within Canada?

Yes

No

Other - Outside of Canada (Which Country)

### For Acupuncturists and TCM Practitioners:

Have you graduated from an accredited minimum 1900 hour Acupuncture training program?

**This is a prerequisite to take ARIABC courses as per our bylaws but does not apply to other health professions. ie Naturopathic Physicians, etc.**

Yes

No

If you answered yes to the above question, which program did you graduate from?

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## Additional Information

### For Acupuncturists and TCM Practitioners:

Are you a current member of **CTCMA** in good standing?

Yes

No

If you answered yes to the above question, how many years have been practising Acupuncture while licensed?

Are you a current member of **ATCMA** in good standing?

If No, please visit [ATCMA](#) and become a member before applying to **ARIABC courses** unless you are a member of another profession that allows you to do injections (ie Naturopathic Physician).

Yes

No

Have you previously completed any training courses in injections?

Yes

No

If you answered yes to the above question, please list the courses along with the hours of each course you have completed

Do you currently have professional liability insurance of at least \$1,000,000 to practice injections?

Yes      No

Do you have a current valid First Aid and CPR Health Practitioner Level certification?

Yes      No

If you answered Yes to the above question, from where did you receive your certification?

If you answered No, we recommend the [St. John's Ambulance: Standard First Aid – Health Care Provider](#), which also covers CPR Health Care Provider for a total of \$165 and is valid for 3 years. **A valid certification is required to take ARIABC courses.**

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Signature

Date

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## **Payment by money order or credit card**

Upon approval of your registration application, you will be contacted at your email address to collect your course fee from [info@ariabc.org](mailto:info@ariabc.org)

**Please add [info@ariabc.org](mailto:info@ariabc.org) to your email safe list. It is your sole responsibility to ensure your email address is set to receive communications from ARIABC**

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## **Submission of Application**

Please complete and sign this application in its entirety and either email it to [info@ariabc.org](mailto:info@ariabc.org) or fax it to 778-653-6246