

# Acupoint and Regeneration Injection Association of BC

## Individual membership (Annual fee: \$50.00)

Name	Email address	
Street address	Street address line 2	
City	Province	Postal Code
Phone number		
<b>Notes about individual membership privileges:</b> Our members get priority registration to courses hosted by ARIABC		
Business Information		
Clinic Name		
Street address	Street address line 2	
City	Province	Postal Code

Phone number

## **Education Information**

Designation

R.Ac TCMP Dr. TCM

Other

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

Yes

No (Which Country)

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

Yes No

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

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## Additional Information

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?

Have you taken any injection courses?

If Yes, please list the most recent courses (60 hours) and their dates.

Yes No

Have you 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 <u>St.John's Ambulance: Standard First Aid –</u> <u>Health Care Provider</u>, which also covers CPR Health Care Provider for a total of \$165 and is valid for 3 years. **A valid certification is required to join ARIABC** 

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Signature

Date

## Duration of membership (1 year)

From (date of membership approval) to (date of membership renewal). **ARIABC** memberships are renewed and charged \$50 annually.

#### Payment by cheque or credit card

Upon approval of membership application, you will be contacted at your email address to collect your \$50 membership fee from info@ariabc.org

Please add 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

#### **Submission of Application**

Please complete and <u>sign</u> this application in its entirety and either email it to info@ariabc.org or fax it to 778-653-6246