



Registration Form For Life Members

(For membership year June 1, 2009 to May 31, 2010)

No Fees

Name _____

Address _____ Telephone _____

City & Province _____ Postal Code _____

Email _____

Employer _____

Address _____ Telephone _____

City & Province _____ Postal Code _____

Position _____

Area of Service _____

Full time _____ Part time _____ Non-practising _____

From time to time MSOT receives requests for mailing labels or to forward info via e-mails regarding job opportunities, continuing education or research, etc. which would be of interest to members.

Would you like to be on the MSOT mailing list? Yes No

Would you like to receive e-mails from MSOT? Yes No

MSOT Update Newsletter

In an effort to save trees and decrease printing costs, the MSOT newsletter can be delivered by e-mail!

Please indicate your preference by checking off the box below:

I would like to receive the newsletter via regular mail.

I would like to receive the newsletter via e-mail.

Thank you for applying for MSOT membership.

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