



Affiliate Member Registration Form

(For membership year ending May 31, 2019)

Fees: \$37.50

Name _____

Address _____ Telephone _____

City & Province _____ Postal Code _____

Email _____

Check the box that applies to you:

- I am an individual who works in a role that assists occupational therapists in their practice
- I am an individual who has an interest in the profession of occupational therapy
- I represent a group or organization that has an interest in the profession of occupational therapy

Employer _____

Address _____ Telephone _____

City & Province _____ Postal Code _____

Position _____

Reasons for wanting to be an Affiliate Member of MSOT:

The rights of Affiliate Members are as follows:

- May attend meetings of the members, and shall be non-voting members
- May not hold office in the Society
- Are eligible to serve on committees of the Society and vote as committee members

Affiliate Members are also entitled to receive a copy of the MSOT Update, published six times per year.

Thank you for applying for MSOT membership.
