

CATEGORY

- Member**
On the date of application, the individual shall be employed in public relations or teach or administer a public relations course, or possess a diploma, certificate or degree in public relations.
- Emerging Professionals**
On the date of application, the individual has been employed full time less than two years in public relations. After two years of membership at the Emerging Professionals level, the member would be required to renew as a full member.
- Associate**
On the date of application, the individual is not employed full time in public relations, or is employed in functions partially related to public relations.
- Individual Member**
The applicant must live and work outside specific geographical areas and must meet the eligibility requirements as for Member.

ELIGIBILITY

- I hereby attest that I meet the eligibility requirements of the membership category selected above.

HOW TO SUBMIT

Forward the completed application form, signed by the applicant, directly to the National Office.

DUES

A cheque payable to The Canadian Public Relations Society, Inc., or credit card information covering the initiation fee, National and Member Society dues and applicable GST/HST must accompany the application.

Please type or print clearly. Note: As a result of the Federal Privacy Legislation (Bill C6), you are not obligated to provide us with your birthdate or home address.

Name of Member Society

Name _____ Organization/Employer _____

Business Address _____

Position or Title _____

City _____ Province _____ Postal Code _____

Email _____ Business Tel. () _____ Fax () _____

Nature of organization's business or activity

- | | | |
|---|---|---|
| <input type="radio"/> Association | <input type="radio"/> Government—Federal | <input type="radio"/> Industry/Manufacturer |
| <input type="radio"/> Charitable/Non-Profit | <input type="radio"/> Government—Municipal | <input type="radio"/> PR Agency/PR Consultant |
| <input type="radio"/> Crown Corporation | <input type="radio"/> Government—Provincial | <input type="radio"/> Service |
| <input type="radio"/> Education | <input type="radio"/> Government—Regional | <input type="radio"/> Utility |
| <input type="radio"/> Financial Services | <input type="radio"/> Health | <input type="radio"/> Private Sector, Other |
| <input type="radio"/> Other (specify) | | |

Date of birth (DD/MM/YY) _____ Language of Society Mailings: English French

Home Address _____

City _____ Province _____ Postal Code _____

Email _____ Business Tel. () _____ Fax () _____

Address to be used for CPRS mailings & Directory listing: Business Home

Referred by _____

Have you ever been accepted for membership in CPRS before? Yes No

Member Society From To

EDUCATIONAL BACKGROUND

Please provide details

	Years (YY-YY)	Institution	Program
High School			
College			
University			
Post-Graduate			

INFORMATION ON PRESENT POSITION

Please provide a brief summary of your current public relations responsibilities.

Length of tenure in your present position: From (MM/YY) to present

STATEMENT OF APPLICANT

I hereby apply for membership in The Canadian Public Relations Society, Inc., and attest to the accuracy of the information contained in this application.

I have read and understand the Society's "Code of Professional Standards" and I agree to abide by this Code and Bylaws and Regulations as established by the Society.

I agree to accept the Society's decision regarding this application for membership.

I agree to receive electronic communications from The Canadian Public Relations Society, Inc. which may include but is not limited to newsletters and communications about CPRS events and activities and acknowledge that I may withdraw my consent at any time by contacting **unsubscribe@cprs.ca**

Signature of Applicant

Date

Membership dues may be paid by Visa AMEX Mastercard Cheque enclosed

Name on credit card

Card #

CW

Expiry date

Signature

Note: For security reason, never email credit card information. If you wish to provide your card number, print then mail or fax this form in. If you wish to email the form, do so without credit care information then call the national office afterwards to provide it.

NATIONAL SOCIETY USE

Verified by National Office

Date

Category Member Affiliate Associate

Recommended Accreditation Eligibility

Date



Canadian Public Relations Society

Advancing Public Relations & Communications Management

CPRS.CA