



# 2009 BCAK ACADEMIC MEMBERSHIP APPLICATION FORM

BC Association of Kinesiologists  
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## **APPLICANT INFORMATION**

An Academic Member is a person who is or was employed as a professor, instructor, or member of the faculty of a post-secondary educational institution in Canada that is recognized by the Board, in a faculty or department which offers courses in kinesiology, human kinetics, and related subjects.

**MEMBER INFORMATION** This is your information of record where you will be contacted by the BCAK. You will only be contacted using this information. Please print legibly or type. An e-mail address is important. The BCAK communicates with its members by electronic means, except where required to by mail.

FIRST NAME:		LAST NAME:	
TITLE:			
DEPARTMENT:			
PROGRAM:			
INSTITUTION:			
STREET ADDRESS 1:			
STREET ADDRESS 2:			
CITY:		PROV:	POSTAL CODE:
TELEPHONE:		EMAIL:	

**MEMBERSHIP DUES** Membership Year runs from January 1 – December 31

2009 Membership Dues	Dues
BCAK – Academic Membership Dues	\$ 125.00
CKA – Membership Dues	\$ 25.00
5% GST Payable on dues (No: 874522329 RT0001)	\$ 7.50
<b>TOTAL MEMBERSHIP DUES</b>	<b>\$ 157.50</b>

## **PAYMENT METHOD**

Cheque (payable to "BCAK")     
 VISA     
 MasterCard     
 Amex  
Card Number: \_\_\_\_\_ Expiry: \_\_\_\_\_  
Name on Card: (please print) \_\_\_\_\_

## **DOCUMENTS ENCLOSED WITH THIS FORM**

- Business Card (if available)
- Payment

## **APPLICATION CONFIRMATION & SIGNATURE**

I agree & consent to the BCAK releasing my contact information to the CKA for CKA membership purposes.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Keep a copy of this form for your records**