



of BRITISH COLUMBIA

Reflexology Association of BC

Membership Renewal

PO Box 248, 720 Sixth Street, New Westminster, BC, V3L 3C5

Voice: 604.435.8325 · E-Mail: membership@reflexologybc.com

Web: www.reflexologybc.com

January 1, 2010 – December 31, 2010

Annual Fees: General Membership/Student ____ (\$30) Practitioner ____ (\$50) Instructor ____ (\$80)

First Name:		Last Name:		Member Number:	
Address:				Membership Type:	
City & Province		Postal Code:		Member Since:	
Home Phone #:			Work Phone #:		
E-Mail Address:			Website Address:		
Changes to Web Site Information:					
Newsletter:	Paper (mailed)	Yes / No	Electronic (e-mailed)	Yes / No	
Listed on the RABC Web Site	Yes / No	Contact Phone for Referrals			
Note: Students and General Members are not listed on the web site					

I agree to adhere to the Objectives, Code of Ethics, Code of Conduct and Constitution and By-laws of the Reflexology Association of BC (RABC) and pay the annual dues.

Signature: _____

Date: _____

Make cheque or money order payable to the "Reflexology Association of British Columbia" and mail the renewal form to: MEMBERSHIP COMMITTEE CHAIRPERSON, RABC, P.O.BOX 248, 720 Sixth Street, New Westminster, BC, V3L 3C5.

A receipt and a membership card will be issued upon receipt of the renewal application and applicable fee.

Office Use:	Date Received: _____	Amount Received: _____
	Cheque Number: _____	Receipt Number: _____