

**APPLICATION FOR NEW MEMBERSHIP**  
**For November 01, 2018 – October 31, 2019**

(Completed applications to be emailed to cherylmata@gmail.com  
 or mailed to ACPEWA, 1 Villiers Way, Parkwood)

Preferred Title:..... Name:.....

Address: .....

Preferred phone:.....Email:.....

Completed.....unit/s of CPE in the year/s.....

with CPE Supervisor(s) .....

Date of completion of 1<sup>st</sup> unit of CPE: .....

Do you agree to abide by the Constitution of ACPEWA Inc.? .....

(A copy of the Constitution, including eligibility criteria for each category of membership can be found on our website www.acpewa.org)

<b>Applying for:</b>	<b>Member</b>	<b>Supervisory member</b>
Member - recently completed 1 <sup>st</sup> unit of CPE:	Fee \$0.00	\$ 0.00
Member:	Fee \$ 75.00 (unwaged/student: \$ 50.00)	\$ _____
Supervisory Member:	Fee \$ 250.00 (unwaged \$150.00)	\$ _____
Voluntary contribution to Travel Fund		\$ _____
Voluntary contribution to Training Fund		\$ _____
	Total:	\$ _____

Fess can be paid to ACPEWA Inc at Bankwest 306-035-4151163 (please reference with name)  
 If paying by cheque, please make payable to **ACPEWA Inc.** and post to:  
 1 Villiers Way, Parkwood WA 6147

**1<sup>st</sup> unit CPE students: free membership for 12 months from the date of graduation.**

Updated January 3, 2019

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Approved on ..... Membership status..... Fee: \$..... Receipt No.....