



# Support Membership 2015-2016

A support membership offers all the benefits of active membership, except Professional Liability Insurance, at a discounted rate. Your CDHA membership gives you credibility, visibility, and voice in addition to professional development opportunities, subscriptions to a research journal and professional magazine, and numerous other value-added products and services.

Visit [www.cdha.ca](http://www.cdha.ca) for more information.

For faster processing, renew your membership online today at [www.cdha.ca/renew](http://www.cdha.ca/renew)



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Tel: 1-800-267-5235 | Fax: 613-224-7283



**CDHA invites you to rediscover your membership.** We take great pride in offering a premium membership benefits program.



THE CANADIAN DENTAL HYGIENISTS ASSOCIATION  
L'ASSOCIATION CANADIENNE DES HYGIÉNISTES DENTAIRES

## SUPPORT MEMBERSHIP

(November 1, 2015 – October 31, 2016)

*Note: Members in the provinces of Alberta, Saskatchewan and Nova Scotia should not use this form. Your membership is processed through your provincial regulatory body.*

### What would you like to do?

- Renew my membership

Membership number: \_\_\_\_\_

- Apply for membership

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Country: \_\_\_\_\_

Home telephone: (\_\_\_\_) \_\_\_\_\_

Cell phone: (\_\_\_\_) \_\_\_\_\_

Preferred number:  Home Phone  Cell Phone

### New applicants

Birth date (mm/dd/yyyy): \_\_\_\_\_

Gender:  Male  Female

Dental hygiene school attended: \_\_\_\_\_

Graduation date (mm/yyyy): \_\_\_\_\_

### Non-practising member declaration

- I certify that I am a dental hygienist. I further certify that I am not practising in Canada and that the information provided and the statements made in this application are true.

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

Date (mm/dd/yyyy): \_\_\_\_\_

## PREFERENCES

### Email communications

*Your email communication preferences can be adjusted at any time. Through your online profile you have the option of selecting specific types of CDHA email to receive.*

### Do you wish to receive email communication from CDHA?

- Yes  No\*

*\*Note: you may not opt out of receiving transactional emails such as invoices, receipts, registration confirmations, etc.*

### Third party mailing consent

- I CONSENT for CDHA to release my mailing address to third party partners who meet the requirements of third party list rental.

### Membership directory listing

- I CONSENT for my name to appear in the listing.

### Professional status

- Independent Practice  
 Independent Practice + Employee/Contract  
 Employee/Contract

### Publications

Would you prefer to receive electronic versions only of the following publications?

*Canadian Journal of Dental Hygiene*  Yes  No

*Oh Canada!*  Yes  No

*Note: All issues of the journal and magazine are always available online at [www.cdha.ca](http://www.cdha.ca) for reading and printing.*

## FEE TABLE

### Support Membership

	Provincial Fee	CDHA Fee	Total
CDHA/BCDHA	\$72	\$93	\$165
CDHA/MDHA	\$41	\$93	\$134
CDHA/NBDHA	\$20	\$93	\$113
CDHA/NLDHA	\$40	\$93	\$133
CDHA/PEIDHA	\$33	\$93	\$126
ON, NU, NT, QC, YT	n/a	\$93	\$93
Out of country	n/a	\$93	\$93

## PAYMENT

Subtotal (from table): \_\_\_\_\_

- Add \$50 to join the Educator Community  
 Add \$75 to join the Independent Practice Network (access to UIN, CDHA-ACHDnet™, our online IP community, and the "Find an Independent Dental Hygienist" listing)

Total Fee Enclosed: \_\_\_\_\_

- Cheque or money order in Canadian funds. (Please make payable to CDHA. A \$25 fee will be charged for payments returned from the bank.)

### Card type

- VISA  MasterCard

Card number: \_\_\_\_\_

Expiry date (mm/yyyy): \_\_\_\_\_

Name on card (please print): \_\_\_\_\_

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

Membership fees are non-refundable, non-transferable and are not prorated.

Your receipt and membership card will be emailed within three business days of processing your application and payment. Hard copies will only be mailed on request.



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