



## STUDENT MEMBERSHIP APPLICATION

Online Application: [www.cagp-acpdp.org](http://www.cagp-acpdp.org)

Please use this form to join CAGP in the Student Membership category. This is an individual membership and is non-transferrable. Proof of full-time enrollment in a post-secondary institution is required.

### INFORMATION

First Name		Last Name	
<input type="text"/>		<input type="text"/>	
Organization		Title	
<input type="text"/>		<input type="text"/>	
Address	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		Phone	Language Preference
<input type="text"/>		<input type="text"/>	English <input type="checkbox"/> French <input type="checkbox"/>

Please select the appropriate amount based on your province of residence:	
<b>Membership Fee by province:</b>	<b>\$90 + HST</b>
RESIDENTS OF AB, BC, SK, MB, QC, YK, NT, NU INCLUDES 5% GST	<input type="checkbox"/> \$94.50
RESIDENTS OF ON INCLUDES 13% HST	<input type="checkbox"/> \$101.70
RESIDENTS OF NS, NL, NB, PE INCLUDES 15% HST	<input type="checkbox"/> \$103.50

(HST#870678299RT0001)

If you are a student, have you attached the proof of enrollment?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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### METHOD OF PAYMENT

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> CHEQUE (Payable to Canadian Association of Gift Planners)
Cardholder Name:		
Card Number:		Expiry Date (mm/yy):
<input type="text"/>		<input type="text"/>

Please confirm your consent for electronic communications:

☐ Yes, I consent to CAGP sending me electronic communications.

☐ No, I do not consent to CAGP sending me electronic communications.

☐ I certify that I have read and subscribe to the CAGP Code of Ethics posted on the website and by virtue of signing below, I accept the obligation to abide by the Code and acknowledge that a violation on my part may result in action by the CAGP Board of Directors.

**SIGNATURE:** \_\_\_\_\_

Please return the completed application form by mail or email to:

**Canadian Association of Gift Planners**

14 Chamberlain Avenue, Suite 201A, Ottawa, ON K1S 1V9

Email: [membership@cagp-acpdp.org](mailto:membership@cagp-acpdp.org)