

APB MEMBERSHIP APPLICATION FORM

Emeritus (retired) Membership

A member may request to become an Emeritus if that member was assigned the 'Retired member' status by a Professional Accrediting Organization for biologists in Canada. Emeritus members who are retired and do not have the 'Retired member' status assigned by a Professional Accrediting Organization for biologists in Canada, must sign a waiver. The waiver of liability is to affirm that they will not represent themselves as a professional biologist or professional biology practitioner in the Province of British Columbia, unless they have the required professional accreditation from an authorized accrediting organization; and will not hold APB liable if they do misrepresent their professional status.

APB Privacy Policy

Respecting the privacy of personal information is important to us. Please see the APB Privacy Policy, available online (www.professionalbiology.com), for details on how the information you provide is used by the APB.

The APB members database and website are hosted on a Canadian server. Personal information collected from APB members is subject to the privacy laws in Canada set by the Office of the Privacy Commissioner of Canada.

Necessary steps are taken to ensure our members' and sponsors' payment card data is kept secure and that they, as well as the APB, are protected against data breaches. APB uses an online engagement management system that has been validated by the PCI Security Standards Council. Compliance with the Payment Card Industry Data Security Standard (PCI-DSS) means that the Association adheres to requirements for security management, policies, procedures, network architecture, software design, and other critical protective measures.

Membership Fee

Emeritus members may join annually, or they may choose to purchase a long-term membership. The 'Emeritus-Permanent' membership option allows retired members to do a one-time lump payment of \$200 instead of renewing their membership every year. Membership annual fee is as per calendar year.

To pay by phone with a credit card, please contact the APB office (250-483-4283).

Cheque (payable to the 'Association of Professional Biology' – address as per below).

Address: #300-1095 McKenzie Ave., Victoria, BC, V8P 2L5

Phone: 250.483.4283

Fax: 250.483.3439

Email: registrar@professionalbiology.com

APB Membership Application – Emeritus Member

Emeritus membership category – Please select one:

(Prices include GST)

<input type="checkbox"/> Emeritus - Annual	\$52.50

<input type="checkbox"/> Emeritus - Permanent	\$210.00

SECTION A - PERSONAL INFORMATION

First name	
Last name	
Informal first name <i>(if preferred for communications)</i>	
Home address	
City	
Province	
Postal Code	
Home phone number	
Cell number	
Email	
Alternative email ¹	

¹Members can provide an alternative email address to be used by the APB office if the primary email account is cancelled.

Accredited Status:

Are you a member in good standing of a Professional Accrediting Organization for biologists in Canada with the status 'Retired member'?

Yes No

Name of accredited Organization: _____

If no, please sign the attached waiver.

Thank you.

Waiver of Liability

I understand and acknowledge that affiliate membership in the Association of Professional Biology (APB) does not provide me with any professional accreditation, or allow me to represent myself as a professional biologist or professional biology practitioner for any purpose.

I understand and acknowledge that I must not represent myself as a professional biologist or professional biology practitioner in the in the Province of British Columbia, or in any jurisdiction where legislation prohibits such representation, unless I have the required professional accreditation from an authorized accrediting organization, such as the College of Applied Biology.

I will not hold APB liable in any way if I represent myself as a professional biologist or professional biology practitioner without the proper professional accreditation.

By submitting this application for APB affiliate membership I affirm that I have read and understand the foregoing terms and conditions and will abide by them.

Print name: _____

Signature: _____

Date: _____