



Canadian Society for Medical Laboratory Science  
Société canadienne de science de laboratoire médical

**Associate Non-Certified Membership Application Form**

CSMLS ID # \_\_\_\_\_

Mr.     Miss.     Mrs.     Ms.

Date of Birth: MM/DD/YY \_\_\_\_\_

Name: \_\_\_\_\_  
Last    First    Former Name (if applicable)

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Privacy Statement:** I have read the privacy agreement and accept the terms with the following options:

Privacy Policy: <https://csmls.org/About-Us/About-CSMLS/Privacy-Policy.aspx>

- Exclude my name in the list sent to the Member Discount Programs/Partners
- Exclude my name in the list sent to the CSMLS Partner Provincial Societies
- Exclude my name for contact by email by CSMLS

**Membership Fee: \$ 132.00**

Membership valid until December 31.

Completed forms can be mailed, faxed, or emailed to us. Please find contact information at bottom of application.

*\*Please note that this membership cannot be completed online, it must be processed in the office.*

Once your payment has been processed, you will receive an emailed Confirmation of Membership.

**Applicant's Statement:**

I understand that acceptance of my Associate Non-Certified membership application does not mean I am eligible to write the CSMLS Certification Exam.

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

**This is an annual membership that will expire December 31 each year. Membership fees are not prorated.  
Fees are non-refundable and non-transferable**

**\*\*\* If you are outside of Canada, you must make your payment by credit card only; we accept Visa, MasterCard or American Express. Bank drafts or money orders will not be accepted and your application will be returned to you.**

*Payments must be made in Canadian funds. If your payment is returned, you will be charged a \$25.00 Administration Fee*

<input type="checkbox"/> Cheque (payable to: <b>CSMLS</b> )		CSMLS USE ONLY	
<input type="checkbox"/> Amex <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard			
Credit Card # _____		Date Proc'd: _____	
Expiry Date _____			
Cardholder: _____ <small>(please print clearly)</small>		CSMLS ID# _____	UsrCrd: _____



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### Associate Non-Certified Membership Application Form

#### Eligibility:

An Associate Non-Certified Member shall be a person with a professional affiliation with medical laboratory science who is interested in accessing the programs and services of the CSMLS but is not eligible for enrolment under any other membership category.

Schedule of Benefits					
Subscription to CJMLS	Member Discount Program	Members Only Website	Discounts on CE Courses & LABCON Fees	Member Discounts on Certification Exam	Voting Rights
YES	YES	YES	YES	YES*	NO

\*Excluding Non-Residents of Canada

Members in the Associate Non-Certified category are **not automatically eligible** to write the CSMLS Certification Exam. If you are an internationally educated medical laboratory technologist and you want to write the exam, you must apply for the CSMLS Prior Learning Assessment. The assessment will tell you if your experience is equivalent to the Canadian standard.

For more information, visit our website at:

<http://csmls.org/Certification/Become-Certified-Internationally-Educated-Profes/First-Steps-to-Certification.aspx>

Once you have successfully completed the certification exam, you must change your membership status. We will give you more information at that time.