



## 2023/2024 FULL MEMBER RENEWAL FORM

April 1, 2023 - March 31, 2024

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

### Preferred Contact Info:

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

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (P) \_\_\_\_\_ (C) \_\_\_\_\_ (O) \_\_\_\_\_

Email(required): \_\_\_\_\_ Fax: \_\_\_\_\_

### Geographical area of work:

- St. John's/Metro       Avalon Peninsula/East       Central  
 West       Labrador       Other \_\_\_\_\_

### Please indicate any activities in which you are interested in participating.

1. APNL Committees/Reps

- Executive       Continuing Education       Advocacy  
 Membership       Psych Month Activities       Newsletter

2. Peer Counselling/Consult

- I am willing to provide peer counseling or consultation to fellow APNL members on a pro bono basis (Not intended as a means of psychological counselling or intervention)

3. Public Speaking

I am available to offer presentations or respond to requests to speak to:

- Fellow Psychologists**    **Media**    **Public/ Community**

on the following psychology related topic(s)/issue(s):

\_\_\_\_\_

\_\_\_\_\_

For APNL Office Use Only

Date: \_\_\_\_\_ APNL#: \_\_\_\_\_ Member Category: \_\_\_\_\_

Fees Paid: \_\_\_\_\_ Receipt#: \_\_\_\_\_

**Renewing Members must meet ONE of the following criteria:**

1. I am a Full or Provisional Registrant with the Newfoundland Labrador Psychology Board (or an equivalent Provincial/State Licensing Board) \_\_\_\_\_ Board and Registration Number

**OR**

2. I hold a graduate degree (Master's or Doctorate) in Psychology acceptable to APNL

**Please CLEARLY indicate your Renewal FULL Membership Category and applicable fee below****DEADLINE: March 31, 2023 (Late Renewal Fee additional \$25.00 if renewing after March 31, 2023).****Before March 31<sup>st</sup>, 2023**

- \$200 Full Member  
 \$190 Full Member with CPA membership (CPA Member # \_\_\_\_\_)

**After March 31<sup>st</sup>, 2023**

- \$225 Full Member  
 \$215 Full Member with CPA membership (CPA Member # \_\_\_\_\_)

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

**Payment Options - NOTE: All Payments will be processed after April 1**

- Cheque/Money Order to** - APNL P. O. Box 26061, RPO LeMarchant Road, St. John's, NL A1E 0A5
- E-Transfer - All e-transfers must use the following:**  
*Email : membership@apnl.ca*  
*Security Question - What for*  
*Security Response - Membership2023*