	ans Association			
OPTICIANS Association of Canada 2024 ME	EMBERSH	HIP FOF	RM	
Association des Opticiens du Canada	OPTICIANS & STUDE	ENTS		
APPLICANT INFORMATION:				* mandatory field
First Name* Last Name*		Language [:]	*: 🗌 English 🗌 F	rench
Email Address*				
Optician OAC members with 5+ consecutive years of membership qualify for t				
below if eligible. For more information, please contact us.		·····, ··· ·	, , ,	
ADDRESS:			· · 🗖 chain	
Company Name (If company address)		Inaep	endent 🛄 Chain	Optometrist Office
Street Address*				
City*P	، rovince*	Postal Code*		
COMMUNICATION PREFERENCES:	Optician	Graduated Stude	ent Registered Stud	lent Intern
I would like to receive the OAC e-newsletters and emails about the field of Opticianry.	License #*	Registration #	Studen	nt #*
I would like to receive the OAC event and webcast updates. I would like to receive information from the OAC on behalf of industry partners.			hool	
PLI ELIGIBILITY: in order to be eligible for PLI, you must maintain active registra-	Province*			or your license with the College
tion with your provincial regulatory body. The OAC may verify your registration status with your provincial regulatory body to determine your eligibility for PLI.		that you are required to License Number.	o contact the OAC to u	update us on your Opticians
	OAC MEMBERSH			
AB BC MB PEI SK - Professional Liability Insurance (1,000,000) - INCLUE		64 + 5% GST (\$7.23)	\$151.87	
QC - Professional Liability Insurance (2,000,000) - INCLUDED			-	
ON - Professional Liability Insurance (1,000,000) - INCLUDED	\$159.5	86 + 13% HST (\$20.78)	\$180.64	
ON LOBLAW - Professional Liability Insurance (1,000,000) - INCLUDED Loblaw Optical reimburses submitted OAC membership fees.	\$144.6	64 + 13% HST (\$18.80)	\$163.44	
NFL EYEGLASS FITTER - Professional Liability Insurance (1,000,000) - INCLUDE	.D \$144.6	64 + 15% HST (\$21.70)	\$166.34	
NFL CONTACT LENS FITTER - Professional Liability Insurance (3,000,000) - INCL	LUDED \$173.	14 + 15% HST (\$25.97)	\$199.11	
NS - Professional Liability Insurance (1,000,000) - INCLUDED	\$144.	64 + 15% HST (\$21.70)	\$166.34	
NB - Professional Liability Insurance (1,000,000) - INCLUDED		Paid by the	\$0.00	
ļ	Ор	oticians Assoc. of N.B		
				\$
PROFESSIONAL LIABILITY INSURANCE UPGRADE (optional): 3,000,000 PLI			\$28.50	
5,000,000 PLI			\$56.50	
INTERNATIONAL OPTICIANS ASSOCIATION (IOA) MEMBERSHIP			FREE	
Membership with the IOA will provide you with the ability to network with Opticians worldwi	vide, access to global		FNLL	
r				
TOTAL				\$
METHOD OF PAYMENT: (check one) Cheque** Money Order*	** 🗌 VISA 🗌 Mastercard			
Credit Card Number Expiry Date				
CVC (3 digit) AMEX (4 digit)Name of Cre				
I authorize the OAC to charge my credit card in the above amount. Signature of Card Holder				
**CHEQUES & MONEY ORDERS MUST BE MADE PAYABLE	<u>2</u> TO " <u>OPTICIANS ASSOCIATION O</u>	<u>)F CANADA</u> " AND SENT IN	I WITH THIS REGISTR	ATION FORM
Opticians Association of Canada, PO Box. 37043 St. Vital Centre, Winnipeg, Manitoba R2M 5R3				
Ph. 1-800-847-3155 (1-204-982-6060) Fax. 1-866-735-0283 Email. canada@opticians.ca Website. opticians.ca				

By submitting this application, the applicant declares that (s)he will support the OAC, its objectives & goals. The OAC observes all regulations set out by PIPEDA and relevant Provincial regulations. The OAC respects your privacy. We do not share your personal information for commercial purposes.