

Application for BCADA Membership

Membership runs September 1 – August 31

Mail your application to the address below. Please use one form/member.

Name (Last First Initials)	
Institution/Organization	
Mailing Address	
City	Postal Code
Work Phone	Years Advising
E-mail Address	

Memberships

\$ 25.00 Membership Renewal fee (Active or Associate)

\$ 25.00 Membership fee for New Members

Amount enclosed: \$_____

(Make cheque payable to **BCADA**)

Please mail this application for membership form to:

Lisa Lake, Thompson Rivers University

900 McGill Road

PO Box 3010

Kamloops BC

V2C 5N3