

NILD Canada™ Associate Registration 2010

Associate registration is available to schools or groups using NILD Educational Therapy, Search and Teach Consultants, and individuals such as non-practicing therapists, undergraduate students, professionals, parents etc. who desire to support NILD Canada™ and receive update information about NILD Canada™ as well as discounts at conferences.

CONTACT INFORMATION: New ___ or Renewal ___ Dr. ___ Mr. ___ Miss ___ Mrs. ___ Ms. ___

Last name _____ First name _____ Initial _____

Address _____

City _____ Province _____ Post Code _____

Telephone (Home) _____ (Work) _____

Fax (Home) _____ (Work) _____

E-mail _____

OTHER INFORMATION: Please complete the sections that pertain to you.

1) I am the authorized representative of a School or Educational Therapy Group: Yes / No (If yes, complete this section. If no, go to section 2.) School/Group Name: _____

2) I am a Search and Teach Consultant: Yes / No (If yes, complete this section. If no, go to section 3.)

Search and Teach training completed: _____

3) I am a Non-Practicing Therapist: Yes / No (If yes, complete this section. If no, go to section 4.)

Level of NILD Training _____

Do you plan to return or begin therapy in the future? Yes / No If Yes, approximately when? _____

What is your present profession or occupation? _____

Place of Employment _____

4) I am an undergraduate student Yes / No (If yes, complete this section. If no, go to section 5.)

Name and address of University/College I am attending:

5) I am a Professional: Yes / No (If yes, complete this section. If no, go to section 6.)

Profession _____ Place of Employment _____

6) I am the parent of an NILD Student: Yes / No (If yes, complete this section. If no, go to section 7.)

Student's Name: _____

Therapist's Name: _____

School student attends: _____

7) I do not fall into any of the above categories: Yes / No (If yes, complete this section.)

I would describe myself as _____

- Please send **cheque** payable to NILD Canada and **completed registration form** to:
NILD Canada, 700 Glen Forrest Blvd., Waterloo, ON N2L 4K6