

Membership Application Form

Name: _____ Title: _____

Office address: _____

Telephone: Office (_____) _____ Fax: (_____) _____

Email: _____

Address for correspondence: office address as above or the following address

Membership category (please check one):

(The membership categories are defined on the reverse side of this form)

Active member

Associate member

Signature of Applicant

Date

Name and address of one active SCC member who will endorse your membership:

Name:
Address:

Please send this form together with your curriculum vitae and one endorsement letter to:

Judy Scrivener, National Coordinator
Society of Canadian Colposcopists
780 Echo Drive, Ottawa, ON K1S 5R7

For inquiries, call us at 1-800-561-2416 ext. 320, or email us at jscrivener@sogc.com

1) Active Membership

All Active members shall consist of medical doctors who have displayed a particular interest in and knowledge of cervical diseases and thus are capable of and willing to assist the Society in attaining its goals and purposes. Active membership within the Society carries the responsibility that, if requested by the Provincial Regional Colposcopy Program where applicable, he or she will become involved in that program.

Active members must:

- i) Have obtained their certification in either
 - a. Obstetrics and Gynaecology (in Canada or outside of Canada),
 - b. Family Medicine
 - c. Other specialty

-and-

- ii) Have successfully completed a recognized training program in colposcopy and its related treatment methods as outlined in the Document on Training Requirements by the Society

-or-

Have been a member prior to December 30, 1990.

Active Membership Privileges

- i) Right to vote
- ii) Payment of annual dues – \$125 per year*.
- iii) Right to hold administrative office
- iv) Receipt of all correspondence pertaining to the functions of the Society

2) Associate Membership

To include residents, physicians and other health professionals who have an interest and commitment to the practice and science of colposcopy.

Associate members shall:

- i) Have reduced annually membership fee - \$70 per year
- ii) Not have voting rights
- iii) Not hold an executive position

***Annual dues for active membership will be prorated based upon when the membership application is approved by the Membership Committee.**