

# MEMBERSHIP APPLICATION

Web: reflexologyofbc.com Phone 604.435.8325 Email: enquiry@reflexologyofbc.com

- RABC Annual Membership term is January 1 to December 31
- Membership dues are due each year in January before January 31 via E-transfer or by Cheque
- Applying for RABC Membership after July 1<sup>st</sup>, the Membership Fee is half the amount of what is stated

□NEW MEMBERSHIP APPLICATION or are	e you 🛚 Changing Membership Category
a) Check the above and below box to indicate which men	nbership you are applying for.
b) Not sure which membership is right for you? Find deta	ailed membership criteria on RABC website at reflexologyofbc.com
□\$45 Student - taking courses, and prepar	ring to write the RABC Proficiency Examinations
□\$50 Associate - completed 40 hrs classroom	m, 60 hrs practicum, not completed RABC Examinations
□\$75 Approved Reflexology Practitioner – comp	pleted the requirements of RABC
□\$100 Reflexology Teacher - completed the req	quirements of RABC
□\$25 Friends of RABC - would like to supp	port RABC - no voting privileges
1. YOUR NAME & CONTACT INFORMATION	
First Name:	Last Name:
Mailing Address:	
City:	Province: Postal Code:
Phone:	Work Phone:
Birthdate (yyyy/mm/dd):	Gender: ☐ Male ☐ Female ☐ Prefer not to specify
What modalities are you certified in? ☐ Hand ☐ Foot	□Ear □Face □Other:
Are you applying to write the RABC Proficiency Examinations	s $\Box$ Yes - complete RABC Proficiency Examination Application $\Box$ No
Are you an existing RABC Member and changing Membersh	ıip Category   ☐ Yes   ☐ No
If Yes, check Membership Category you changing to: $\square Asset$	ociate □Approved Reflex. Practitioner □Reflexology Teacher
Email that RABC can contact you at:	
☐Yes, I consent to receiving emails from RABC and ☐No, I do not consent to receiving emails from RA	•

## 2. STUDENT or ASSOCIATE Membership Category – submit the required documents:

- a) a completed and signed RABC Membership Application;
- b) a signed copy of the RABC's Code of Ethics and Code of Conduct;
- c) If applying to take the RABC PROFICIENCY EXAMINATIONS, complete and submit the RABC Proficiency Examination Application, and
- d) submit a copy of the REFLEXOLOGY Certificate(s) indicating successful completion of the course(s) that includes a minimum of 40 hours classroom instruction, and 60 hours of practicum;
- e) Pay the RABC Membership Fee, and Exam Fee if applying to write. (see Payment Page on the RABC website)
- f) See Number 6 below, and sign this Application below.

### 3. FRIENDS OF RABC MEMBERSHIP – submit the required document:

- a) a completed RABC membership application, with signature below;
- b) Pay the RABC annual membership dues. (see Payment Page on the RABC website)

#### 4. APPROVED REFLEXOLOGY PRACTITIONER MEMBERSHIP Category – submit the required documents:

- a) a completed RABC Membership Application;
- b) a signed copy of RABC's Code of Ethics and Code of Conduct;
- c) a copy of the Reflexology Certificate(s) indicating successful completion of course(s) that includes a minimum of 40 hours of classroom instruction, and 60 hours of practicum;
- d) a copy of the RABC Proficiency Examinations results or approved equivalent examinations, as per the RABC BOARD, with a minimum passing grade of 80% on the written exam and on the practical exam:
- e) a completed RABC Website Directory Application (if you want to be listed on RABC website);
- f) if you are already a reflexology practitioner who has met the standards of an RABC recognized Association, submit a copy of your Professional Reflexology Certificate;
- g) an indication of agreement to collect and submit CE Credits as required: 30 Continuing Education Credits are required every 3 years to maintain "Approved Reflexology Status". For more information on CE Credits see RABC website.
- h) Pay the RABC annual membership dues. (see Payment Page on the RABC website)
- i) See Number 6 below, and sign this Application below.

#### 5. REFLEXOLOGY TEACHER MEMBERSHIP – submit the required documents:

- a) a completed RABC Membership Application;
- **b)** RABC Approved Reflexology Practitioner status (as per listed above);
- c) insurance coverage as per 3.3.8 of the RABC Constitution and Bylaws;
- d) anatomy/physiology training and/or knowledge;
- e) certificate of First Aid/CPR;
- f) a copy of the reflexology course notes and charts that meet or exceed what is covered in the RABC Proficiency Examination, unless the course is from an RABC Recognized Reflexology Institution or Association, then the course notes are not required to be submitted but it is the responsibility of that Teacher to ensure those course notes meet or exceed the RABC PROFICIENCY EXAMINATIONS:
- g) reflexology course(s) teaching to total a minimum of 40 hours written and 60 hours practicum;
- h) a completed RABC Website Directory Application;
- i) an indication of agreement to collect and submit CE Credits as required: 42 Continuing Education Credits are required every 3 years to maintain "Approved Reflexology Status". For more information on CE Credits see RABC website.
- j) an RABC Approved Reflexology Practitioner member in good standing with all fees fully paid;
- **k)** Pay the RABC Reflexology Teacher Application Fee;
- I) See Number 6 below, and sign this Application below.

#### 6. APPLICATIONS AND DOCUMENTS and PAYMENT INFORMATION

- a) Submit this completed & signed application, along with the required documents by email to RABC: <a href="mailto:enquiry@reflexologyofbc.ca">enquiry@reflexologyofbc.ca</a>
- b) Please email the documents in PDF file and not a photo image
- c) The required documents are posted on the RABC website under the Membership Tab Applications
- d) For Payment Details see RABC Website under the Membership Tab Payment Details & Fees
- e) If you prefer to mail the application & required documents, please see RABC website for mailing address.

BY COMPLETING THIS APPLICATION FOR RABC MEMBERSHIP, I agree to adhere to the RABC Code of Ethics and Conduct, the RABC Constitution and Bylaws of the Reflexology Association of British Columbia (RABC), pay the annual dues in January of each year, and if an Approved Reflexology Practitioner or Reflexology Teacher, I also agree to collect the required Continuing Education Credits.

Signature:	Date:	
A receipt ar	nip material will be issued upon acceptance of your appli	cation.

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