REFLEXOLOGY ASSOCIATION OF BRITISH COLUMBIA

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 1st, the Membership Fee is half the amount of what is stated

☐ NEW MEMBERSHIP APPLICATION or are you ☐ Changing Membership Category

a) **Check the above and below box to indicate which membership you are applying for.**
b) **Not sure which membership is right for you? Find detailed membership criteria on RABC website at reflexologyofbc.com**

☐ $45 Student - *taking courses, and preparing to write the RABC Proficiency Examinations* **(Complete #s 1, 2, and 6)**
☐ $50 Associate - *completed 40 hrs classroom, 60 hrs practicum, not completed RABC Exams* **(Complete #s 1, 2, and 6)**
☐ $75 Approved Reflexology Practitioner – *completed the requirements of RABC* **(Complete #s 1, 4 and 6)**
☐ $100 Reflexology Teacher - *completed the requirements of RABC* **(Complete #s 1, 5 and 6)**
☐ $25 Friends of RABC - *would like to support RABC - no voting privileges* **(Complete #s 1, 3 and 6)**

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 or ☐ _____

Email that RABC can contact you at: _____

What modalities are you certified in? ☐ Hand ☐ Foot ☐ Ear ☐ Face ☐ Other: _____

Are you applying to write the RABC Proficiency Examinations ☐ *Yes - complete RABC Proficiency Examination Application* ☐ *No*

Are you an existing RABC Member and changing Membership Category ☐ *Yes* ☐ *No*

If Yes, check Membership Category you changing to: ☐ *Associate* ☐ *Approved Reflex. Practitioner* ☐ *Reflexology Teacher*

☐ *Yes, I consent to receiving emails from RABC and receiving electronically the RABC News*
☐ *No, I do not consent to receiving emails from RABC or the RABC News*

Are you an RCRT with the Reflexology Association of Canada or another RABC recognized Association ☐ *Yes* ☐ *No*

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

☐	a	a completed 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 REFLEXOLGY Certificates(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 (see second page)

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

☐	a	a completed RABC Membership Application, with signature below (see second page);
☐	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 the RABC's Code of Ethics and Code of Conduct;
☐	c	a copy of the REFLEXOLGY Certificates(s) indicating successful completion of the course(s) that includes a minimum of 40 hours 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 – and if so item c) and item d) in this list is not required;
☐	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 Membership Fee (see Payment Page on the RABC website);
☐	i	See Number 6 below, and sign this Application

5. REFLEXOLOGY TEACHER MEMBERSHIP Category – 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 and including coverage for teaching;
☐	d	anatomy/physiology training and/or knowledge that is separate from reflexology training courses with knowledge being defined as having or had professional training such as, but not limited to, nurse, naturopath, or massage therapist (provide documentation/certificate);
☐	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 (if you want to be listed on RABC website);
☐	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 (see Payment Page on the RABC website);
☐	l	See Number 6 below, and sign this Application

6. APPLICATIONS AND DOCUMENTS and PAYMENT INFORMATION

a) Submit this completed & signed application, along with the required documents (listed above for the membership category you are applying for) by email to RABC: enquiry@reflexologyofbc.ca
b) Please email the documents in PDF file and not as 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 and membership material will be issued upon acceptance of your application.

Office use: Date received _____ Amount received _____ Pymt type. #_____