



187 Madison Avenue Toronto, Ontario M5R 2S6  
 T: 416-929-5888 F: 416-929-6606

**MEMBERSHIP RENEWAL FORM**

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR PAYMENT.

**PERSONAL INFORMATION**

ACO Member # First Name Last Name Middle Initial

Address - Mailing City/Town Postal Code

Address - Home City/Town Postal Code

Telephone - Home Telephone - Business Fax e-mail Address

**PROFESSIONAL MEMBERSHIPS**

- OCA/CCA
  - CMCC
  - CCO
  - OTHER \_\_\_\_\_
- INSURANCE COVERAGE FOR NEEDLE ACUPUNCTURE  
 YES  
 NO

**ACUPUNCTURE TRAINING/EXPERIENCE**

- Currently practising Acupuncture on a routine basis?  YES  NO
- Types of Acupuncture used:  Needle  Electrical  Laser  Other

**ACUPUNCTURE CONTINUING EDUCATION**

ACO by-laws (section 7.1) state that 12 hours of Continuing Education credits are required every even years to maintain membership status.  
 For the period January 1, 2011 to December 31, 2012:  
**12 HOURS OF CONTINUING EDUCATION TRAINING IN ACUPUNCTURE MUST BE COMPLETED BY DECEMBER 31, 2012**

**MEMBERSHIP RENEWAL FEES**

\*\*\*DEADLINE FOR 2012 MEMBERSHIP RENEWAL IS NOVEMBER 30, 2011\*\*\*

MEMBERSHIP FEES OCA MEMBERS	150.00 + 19.50 HST =	\$ 169.50	SENT AFTER DECEMBER 31, 2011: MEMBER WILL BE CHARGED LATE FEE OF \$100.00 FOR A TOTAL PAYMENT OF
NON-OCA MEMBERS	200.00 + 26.00 HST =	\$ 226.00	
PLEASE MAKE CHEQUE PAYABLE TO: ACUPUNCTURE COUNCIL OF ONTARIO			OCA MEMBERS \$ 269.50 NON-OCA MEMBERS \$ 326.00

PAYMENT TYPE:  CHEQUE  VISA (CARD # \_\_\_\_\_ EXPIRY: / / )

DATE: \_\_\_\_\_ MEMBER'S SIGNATURE: \_\_\_\_\_

**FOR OFFICE USE ONLY**

DATE:  RENEWAL APPROVED  RENEWAL DECLINED  
 ACO #: \_\_\_\_\_ ACO SIGNATURE: \_\_\_\_\_  
 Reasons: \_\_\_\_\_