

WHO'S YOUR
AUDIOLOGIST?



STUDENT MEMBERSHIP FORM

Benefits of Student Membership:

- Waived membership fee
- Waived registration fee to annual Sounds+ conference
- Opportunities to volunteer for projects that will change the Hearing Healthcare industry
- Networking opportunities with both public and private Audiologists

Name

Address

| home |

| phone |

Address

| work |

| phone |

Email

Enrolled in Canadian University, or equivalent and involved in or interested in pursuing a career in Audiology

Degree

| M.Sc. |

| AuD |

| University |

| Year |

Amount Due (waived)

\$350.00

Volunteer Hours

24 max

New Membership

Renewal

Preferred Contact

| home |

| work |

I agree to abide by the code of ethics, by-laws and policies of Sounds+ and that I have not been charged or convicted of any offense that might place me in breach of the aforementioned.

Signature

Please send this form to the address below.

P.O. Box 31229, Halifax, N.S. B3K 5Y1 | info@youraudiologist.ca

www.youraudiologist.ca