



DEPARTMENTAL MEMBERSHIP APPLICATION/RENEWAL FORM

HEAD/CHAIR OF DEPARTMENT

DEPARTMENTAL CONTACT

Name

Name

Telephone Number

Telephone Number

Fax Number

Fax Number

Email

Email

department website address

Please indicate which of these items should be sent to the departmental contact instead of the Chair:

University Prize Exam

Physics in Canada (hard copy)

Job openings

Other _____

INFORMATION REQUESTS (if applicable):

Undergraduate info - contact name

Email

Masters' info - contact name

Email

PhD info - contact name

Email

MEMBERSHIP CATEGORY (plus tax):

- \$532.00 (offers a Ph.D. program)
- \$322.00 (offers a BSc. program)
- \$213.00 (offers college CEGEP level of physics)
- \$107.00 (offers physics related programs)

Kindly email the completed form to membership@cap.ca and further instructions will be emailed to the Departmental Contact