



Canadian Association of Occupational Therapists

100-34 Colonnade Road, Ottawa, ON K2E 7J6
 E-mail: membership@caot.ca • Fax: (613) 523-2552
 Tel: (800) 434-2268 or (613) 523-2268, ext. 225/246

Member number

**OCCUPATIONAL THERAPIST
 ASSISTANT ASSOCIATE**
 October 1, 2018 to September 30, 2019

Personal information		
I prefer French correspondence Yes <input type="checkbox"/> No <input type="checkbox"/>		
First name	Middle name	Last name
Address		
City	Province	Postal code
Country	Telephone	Email

New registrants for 2018-2019 Please select the name of the accredited Canadian institution and graduation date where you completed your Occupational Therapy Assistant/ Physiotherapy Assistant training:

<input type="checkbox"/> Capilano University	<input type="checkbox"/> Georgian College	<input type="checkbox"/> Niagara College	<input type="checkbox"/> Sault College
<input type="checkbox"/> Centennial College	<input type="checkbox"/> Humber College	<input type="checkbox"/> NorQuest College	<input type="checkbox"/> Sir Sandford Fleming College
<input type="checkbox"/> La Cité collégiale	<input type="checkbox"/> MacEwan University	<input type="checkbox"/> Nova Scotia Community College - Cumberland Campus	<input type="checkbox"/> triOS College - Brampton Campus
<input type="checkbox"/> Collège Boréal	<input type="checkbox"/> Medicine Hat College	<input type="checkbox"/> Okanagan College	<input type="checkbox"/> triOS College - London Campus
<input type="checkbox"/> College of the North Atlantic	<input type="checkbox"/> Mohawk College of Applied Arts & Technology	<input type="checkbox"/> SAIT Polytechnic	<input type="checkbox"/> triOS College - Toronto Campus
<input type="checkbox"/> Eastern College - Halifax Campus			<input type="checkbox"/> Vancouver Community College

Graduation date: _____

If you are a new registrant and do not see your educational institution on this list, please complete an Individual Associate form.

If you have previously been a Support Worker Associate with CAOT, you have been grandfathered into the new OTA Associate category and do not need to provide any further information.

Fee				
AB, MB, NT, NU, SK, YT (5% GST)	BC, QC (5% GST)	ON (13% GST)	NB, NL, NS, PE (15% GST)	Total 1
\$155.00 + \$7.75 = \$162.75	\$193.00 + \$9.65 = \$202.65	\$155.00 + \$20.15 = \$175.15	\$155.00 + \$23.25 = \$178.25	

If you live in BC or QC, your membership fee is combined and includes both CAOT and CAOT-BC/CAOT and CAOT-QC. If you live in the Yukon, the Northwest Territories or Nunavut, you will automatically become an Member of CAOT-North when you renew your CAOT membership. Your membership fees includes both CAOT and CAOT-North.

CAOT OTA/PTA Professional Liability Insurance	Occupational Therapist Assistant/Physiotherapist Coverage – If you are an Occupational Therapist Assistant (OTA) who may also work as a Physiotherapist Assistant (PTA) you can protect yourself with the new, cost-effective, OTA/PTA professional liability insurance coverage option.					
	SK (6% PST)	ON, MB (8% PST)	QC (9% PST)	NL (15% PST)	All others	Total 2
Professional Liability Insurance (Basic \$6,000,000), and Criminal Defense (maximum of \$100,000)	\$59.00 + \$3.54 = \$62.54	\$59.00 + \$4.72 = \$63.72	\$59.00 + \$5.31 = \$64.31	\$59.00 + \$8.85 = \$67.85	\$59.00	

DISCLOSURE
 BMS is the managing broker and is responsible for placing your insurance coverage(s) referenced above, as well as providing additional services, including dedicated resources and risk management. The above information provides a breakdown of the total annual cost for each line of coverage.

Coverage Options	Limit	Premium	*BMS Fee	Total Cost
CAOT Professional Liability Insurance				
Option 1	\$6M/\$6M	\$49	\$10	\$59
Option 2	\$10M/\$10M	\$87	\$10	\$97
OTA/PTA	\$6M/\$6M	\$59	\$0	\$59
Individual Associate	\$6M/\$6M	\$49	\$10	\$59

Coverage Options	Limit	Premium	*BMS Fee	Total Cost
CAOT Clinic Professional Liability Insurance				
Option 1	\$6M/\$6M	\$53	\$10	\$63
Option 2	\$10M/\$10M	\$61	\$10	\$71

* In addition to the information above, BMS also receives a commission from the insurer. Commission may vary depending on a number of factors, including the insurance purchased and the insurer. For more information, contact BMS Group at 1-855-318-6024 or caot.insurance@bmsgroup.com.



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Member and Associate Assistance Program (MAAP)		Enrol in the Member and Associate Assistance Program (optional, Canadian residents only). MAAP is a wellness program that provides up to 12 hours of professional counselling services when you or your family need support and guidance. Access in-person or telephone counselling for a range of issues such as financial, personal, family, work-related, eldercare and more: \$68.00			Total 3
Fee \$68.00	AB, BC, MB, NT, NU, SK, YT \$3.40 (5% GST)	QC \$10.18 (5% GST + 9.975% HST)	ON \$8.84 (13% HST)	NB, NL, NS, PE \$10.20 (15% HST)	

World Federation of Occupational Therapists (WFOT)		Membership with WFOT (optional) includes the following benefits:			Total 4
<ul style="list-style-type: none"> • Access to the Occupational Therapy International Outreach Network (OTION) website, • Receipt of the WFOT Bulletin (twice a year - online only). To purchase a hard copy, please visit www.wfot.org. 		<ul style="list-style-type: none"> • Receipt of WFOT's E-Newsletter (twice a year) • Interaction with occupational therapists internationally and the opportunity to develop international networks • Eligible to apply for Research Awards 			
Fee \$30.00	AB, BC, MB, NT, NU, QC, SK, YT \$1.50 (5% GST)	ON \$3.90 (13% HST)	NB, NL, NS, PE \$4.50 (15% HST)		

GoodLife Fitness Membership	Receive up to 55% off the regular price of a GoodLife/Energie Cardio membership (optional, Canadian residents only, online only). For pricing, information, and to register or renew your GoodLife/Energie Cardio membership visit http://register.goodlifefitness.com/english
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Public Awareness	Public Awareness Contribution – Contribute to a special public awareness project (optional, any amount) to help raise the profile of occupational therapy in Canada. In 2018-19, funds will be used to promote 'FIND an OT' through targeted advertising on referrer websites. Suggested contribution: \$20.00
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Preferences	I agree to provide my contact details for the following:	<input type="checkbox"/> Yes <input type="checkbox"/> No Recruitment Mailings	<input type="checkbox"/> Yes <input type="checkbox"/> No Product Advertising Mailings
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Fee payment		
<input type="checkbox"/> Cheque enclosed, payable to CAOT There will be a \$50.00 surcharge on all NSF cheques.	<input type="checkbox"/> Money order	<input type="checkbox"/> e-Transfer*
<input type="checkbox"/> VISA / MasterCard	<input type="text"/>	
<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Your credit card security number is the last three digits of the number in the security strip on the back of your card.
Expiry date	CVC	
Cardholder name	<input type="text"/>	
Signature	<input type="text"/>	
	Total 1	\$ _____
	Total 2	\$ _____
	Total 3 (Insurance)	\$ _____
	Total 4 (MAAP)	\$ _____
	Total 5 (Public Awareness Contribution)	\$ _____
	TOTAL PAYMENT DUE:	\$ _____
	GST REG. NO. R100759877 / QST 1020753675	

* Please send the Email Money Transfer to membership@caot.ca. Please provide the answer to your security question in a separate email.

Check this box if you are unable to provide a signature electronically. In doing so, you authorize CAOT to charge the amount listed above and agree to comply with CAOT Bylaws.