|  |  |  |  |
| --- | --- | --- | --- |
| Family name |  | First name |  |

1. **🞎 Renewal without modification**

(Move directly to point 3)

1. **🞎 Renewal with modification**

(Please specify)

|  |  |  |  |
| --- | --- | --- | --- |
| Employer’s name |  |  |  |
| Position |  |  |  |
| Professional address |  |  |  |
| City |  |  |  |
| Province |  |  |  |
| Telephone Number |  |  |  |
| Email |  |  |  |
| Area of expertise |  |  |  |
| Source language |  |  |  |
| Target language |  |  |  |
| Professional affiliations |  |  |  |
| Degrees obtained |  |  |  |

1. **Authorization for publication**

|  |
| --- |
| **🞎** I consentto ACJT-CALT publishing my contact information in the members’ directory on its website: [www.acjt.ca](http://www.acjt.ca). |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Signature |

|  |
| --- |
| **🞎** I do not consent to ACJT-CALT publishing my contact information in the members’ directory on its website: [www.acjt.ca](http://www.acjt.ca). |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Signature |

1. **Membership dues and payment method**

Membership dues are $100 per calendar year, which may be paid in two ways:

1. **Payment by PayPal**: Click the “Send” button at the bottom of the online form and follow the instructions;

b) **Payment by cheque**: please contact info@acjt.ca for instructions on how to proceed.

|  |  |
| --- | --- |
| **🞎** | I plan to pay by PayPal. |
| **🞎** | I plan to pay by cheque. |

1. **Signature**

|  |
| --- |
| I certify that all the information provided on this form is accurate to the best of my knowledge. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Signature |