



## Catholic Physicians' Guild Membership Registration

Name: (please print) \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (O/Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

Please indicate your mailing preference: regular mail \_\_\_\_\_ or e-mail \_\_\_\_\_

2022 DUES (CDN): Active Practice: **\$150.00** Retired/Inactive: **\$100.00** Student/ Resident: **\$ 10.00**

*For 2023 the Guild's membership fee will not include the Canadian Federation of Catholic Physicians fees. The Federation will bill members directly.*

**\*\* We have frequent requests for physicians who follow Catholic medical principles. \*\***  
Would you be prepared to consider such patients? Yes \_\_\_\_\_ Not at present \_\_\_\_\_

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### You may pay your membership fee by cheque, Visa, M/C or e-Transfer

If paying fee by credit card please complete details below and indicate: Visa  or MC

\*Credit Card # .....

\*Expiry Date mm/yy .....

\*Name on card .....

Authorized amount .....

\*Signature .....

Items marked with \* are required for credit card processing

Mail details to: Catholic Physicians' Guild  
c/o Dr. Toni Parsons  
5124 Ranger Avenue  
North Vancouver, BC V7R 3M4

Or Email your registration to: [drtoniparsons@telus.net](mailto:drtoniparsons@telus.net)