



**CANADIAN CRIMINAL JUSTICE ASSOCIATION  
AND PROVINCIAL AFFILIATE (where applicable)**

**APPLICATION FOR MEMBERSHIP**

I WISH TO JOIN AT THE FOLLOWING MEMBERSHIP CATEGORY:

( )	Student	\$25 (A copy of your student card is necessary)	( )	Patron	\$200
( )	Category A	\$60	( )	Corporate	\$500
( )	Category B	\$145			

**\*\* All fees are designated in Canadian Funds.**

**PERSONAL DATA**

Mr. ( ) Mrs. ( ) Ms. ( )

Name : \_\_\_\_\_  
(Please print)

Address : \_\_\_\_\_  
(Street) (Apt.)

\_\_\_\_\_  
(City) (Province) (Postal Code)

Telephone (Home/ Office) Fax E-mail

I wish to receive all material in:  ENGLISH  FRENCH

Profession/Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Field of expertise or field of interest: \_\_\_\_\_

Are you interested in writing an article related to your field of expertise?  YES  NO

Are you interested in becoming a member of the following CCJA Committees?

- Policy Review Committee
- Social Issues Committee
- Public Relations and Visibility Committee

**PAYMENT**

Please make cheque or money order payable to CCJA and mail to:

**CANADIAN CRIMINAL JUSTICE ASSOCIATION**  
320 Parkdale Avenue, Suite 101, Ottawa, Ontario, Canada K1Y 4X9  
Tel: (613) 725-3715 – Fax: (613) 725-3720 – E-mail: ccja-acjp@rogers.com – Website: www.ccja-acjp.ca

or by:  VISA  MASTERCARD  AMERICAN EXPRESS

\_\_\_\_\_  
(Card No.) (Expiry Date)

\_\_\_\_\_  
Name on the card (Print)