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## APPLICATION FOR STUDENT MEMBERSHIP

*(please type or print clearly in black ink)*

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TEL: (\_\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PREVIOUS DEGREES: \_\_\_\_\_

INSTITUTION & PROGRAM CURRENTLY ENROLLED IN: \_\_\_\_\_

EXPECTED GRADUATION YEAR: \_\_\_\_\_

### WORK OR VOLUNTEER EXPERIENCE RELATED TO LANDSCAPE ARCHITECTURE:

*(list all experience beginning with the most recent; please use additional pages if required)*

Company:	Responsibilities:	Dates:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*(please attach your resume to the application)*

A BCSLA Student Membership will enable you to receive copies of *Sitelines*, the Society newsletter, discounted rates for special events and mailings that are related to the Society and its programs, services and activities. Annual member dues will be prorated upon acceptance of your application. Please visit [www.bcsla.org](http://www.bcsla.org) for fee schedule.

### Information provided above will be used to update the BCSLA website upon acceptance of the application.

To safeguard and protect any personal information provided to us, the BCSLA adheres to 'Ten Principles of Privacy Protection', which addresses the requirements for handling "personal information" as defined in both the federal 'Personal Information Protection and Electronic Documents Act', and the 'BC Personal Information Protection Act'. Please visit [www.bcsla.org](http://www.bcsla.org) for a complete copy of the Policy. Your application will be processed upon receipt of your signature below.

I wish to apply for Student Membership. I have read and understand the BCSLA Ten Principles of Privacy Protection Policy.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date: yy / mm / dd