



BCSLA MEMBERSHIP STATUS VERIFICATION REQUEST FORM

Please return the completed form with payment to the BCSLA office by mail or email. The BCSLA will release your BCSLA Membership Status details directly to the specified authority with a copy to you.

MAILING ADDRESS:

Name		Firm	
Address	City	Province/State	Postal/Zip Code
Phone		Email	

SEND VERIFICATION FORM TO:

Name		Authority	
Address	City	Province/State	Postal/Zip Code
Phone		Email	

ENCLOSED PAYMENT:

- Cheque for \$31.50** (\$30.00 + \$1.50 GST) enclosed (payable to "BCSLA").
- Please charge my **Visa Credit Card** in the amount of **\$31.50** (\$30.00 + \$1.50 GST).
(Sorry, no other credit cards are accepted.)

Visa Cardholder Name		Visa Cardholder Signature	
Visa Credit Card #	Expiry Date (MM/YY)	Security Code	

BN131999757 RT0001

To safeguard and protect any personal information provided to us, the BCSLA adheres to the "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". A complete copy of the BCSLA Privacy Protection Policy is available at www.bcsla.org/profession/policies-and-procedures.

- I authorize the BCSLA to release my BCSLA Membership Status details to the above authority.

Name (please print)	Authorized Signature	Date (MM/DD/YYYY)
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The BCSLA offices are located on unceded Coast Salish territories of the xʷməθkʷəjəm (Musqueam), Skwxwú7mesh (Squamish), and səliłwətaʔ (Tsleil-Waututh) First Nations. We recognize and respect the history, languages, and cultures of the First Nations, Métis, Inuit, and all First Peoples of Canada, whose presence continues to enrich our organization, our lives and our country.