

info@chata.ca 208 Carlton Street, Toronto ON M5A 2L1

Membership Category

- ____ Supporting annual membership \$25 (anyone who supports the CHTA values, objectives and activities)
- ____ Organizational membership no charge¹
- ____ Student annual membership \$25; Institution _____
- ____ Elder annual membership \$10²

For professional annual membership for psychotherapists please submit the Professional Membership Application Form - \$75, professional liability insurance separate

¹ We wish to extend our appreciation to organizations who wish to freely connect to a like-minded network of committed advocates of CHTA values.

² We wish to express respect and gratitude to retired members by keeping this fee nominal.

Member Information: PLEASE PRINT

Name:		
Address:		
City:		Postal Code:
Phone:	Fax:	
E-mail:	Website:	
Occupation:		

 New member
 Membership Renewal

Payment by: ____ cheque (Make payable to CHTA) ____ cash ___email transfer Mail to: 208 Carlton St, Toronto, Ont., Canada, M5A 2L1 Email: chata@chata.ca