

NON-PRACTISING ASSOCIATE APPLICATION FORM 2019

FIRST NAME
LAST NAME
DATE OF BIRTH M/D/Y (mandatory)

Please indicate which category you belong to.

- Retired P/VPs who are former Practising Associates or CPCO Members
- Current and retired Catholic Supervisory Officers and Directors, who are former Practising Associates of a local Principals/Vice-Principals' Association
- Aspiring leaders in Catholic school boards, who are enrolled in or who have completed a Principal's Qualification Program
- Managers or non-unionized employees working in Catholic school boards, who are not former members of a local Principals/Vice-Principals' Association

I consent to receiving electronic communications from CPCO that include legal updates, news, publications, invitations to programs and events, and vendor discounts and promotions.

HOME INFORMATION

Address -----
 City ----- Province ----- Postal code -----
 Phone ----- Email -----

BOARD/BUSINESS INFORMATION

Board name ----- Board Id # -----
 Elementary Secondary
 Name -----
 Address -----
 City ----- Province ----- Postal code -----
 Phone ----- Fax ----- Email -----

CPCO Non-Practising Associate fees for the period Jan. 1, 2019 to Dec. 31, 2019 are **\$131.50**. Fees are pro-rated at \$10.96 per month based on date of the month you join. If you join between the 1 – 5th of the month, fees will be pro-rated from the first day of the month you join e.g. if you join March 11 fees will be paid March 1 to Dec. 31. Members registering between the 16th and last day of the month, fees will be pro-rated from the first day of the following month i.e. if you join March 20, fees will be payable for the period April 1 to Dec. 31.

Please note that in order to continue with benefit programs offered through Johnson Inc. (e.g. Life insurance) you must be a Non-Practising Associate.

PAYMENT OPTIONS (CIRCLE ONE)

Please be advised that applications received with payment only will be processed.

1. Cheque made payable to **Catholic Principals' Council Ontario** in the amount of \$ -----

2. Credit cards: **VISA or MasterCard ONLY**

Visa \$ ----- MasterCard \$ ----- Card # ----- Exp. date -----

3-digit security # ----- Name on card ----- Signature -----

For inquiries, please contact **Gaby Aloï** at 1.888.621.9190 ext. 26 or e-mail galoi@cpcp.on.ca. Please return this form along with payment to:
 Catholic Principals' Council | Ontario
 Box 2325, Suite 3030, 2300 Yonge Street
 Toronto, ON M4P 1E4
 Attn. Gaby Aloï

OFFICE USE ONLY
CPCO Associate#: _____