

MEMBERSHIP BENEFITS

- 1 • You will have a voice in letting health care providers and government know your pain management needs.
- 2 • Your voice will add weight in targeting pain as a health care priority.
- 3 • Your voice will be counted when conveying to government the number of chronic pain patients.
- 4 • Regular updates and newsletters will keep you informed.
- 5 • Access to the website to keep you informed of progress and new initiatives.

MEMBERSHIP CLASSIFICATIONS

INDIVIDUAL

Individuals living with, or interested in chronic pain.
Membership is \$15.00 per year

INDIVIDUAL HEALTHCARE PROFESSIONAL

Healthcare professionals interested in chronic pain.
Membership is \$25.00 per year

CORE ASSOCIATIONS

Associations representing clients with painful conditions, designating one representative.
Membership is \$100.00
**Fee assistance is available if necessary*

ACADEMIC/PROFESSIONAL ORGANIZATIONS AND CLINICS

Any academic or professional organization or clinic, designating one representative.
Membership is \$100.00

CORPORATE

Corporations within Canada, designating one representative within the company.
Membership is \$500.00

The Canadian Pain Coalition (CPC) is a partnership of pain consumer groups, individuals, health professionals who care for people in pain and scientists studying better ways to treat pain. Incorporated in 2004 as a not-for-profit organization, CPC runs pain education, awareness and advocacy initiatives that support people with pain and their families.

Canadian Pain Coalition
1143 Wentworth Street West, Suite 202
Oshawa, ON L1J 8P7
T: 905-404-9545 F: 905-404-3727
office@canadianpaincoalition.ca
www.canadianpaincoalition.ca



The Canadian Pain Coalition is

THE NATIONAL VOICE OF PEOPLE WITH PAIN

representing them where discussion and policies are made about pain care.

GOALS:

Promote sustained improvement in the understanding, prevention, treatment and management of all types of pain in Canada

Increase recognition by the public, professionals and government that chronic pain is a disease.

MEMBERSHIP BROCHURE & APPLICATION

MEMBERSHIP APPLICATION

PLEASE PRINT THIS FORM AND FAX OR MAIL WITH PAYMENT

Membership Application and Payment can also be made online at www.canadianpaincoalition.ca



Date of Application: _____

Membership Category—Please choose one

Anything other than an Individual, please designate a member representative. Optional collective information can be found on page three for those wishing to provide statistics.

- Individual—\$15.00 (*No voting privileges*)
- Individual Healthcare Professional—\$25.00 (*No voting privileges*)
- Core Association— \$100.00 *Fee assistance is available if necessary.
No. of patients represented _____
One vote per Association or Patient Group
- Academic/Professional Organizations & Clinics— \$100.00
One vote per Academic or Professional Association

Corporate— \$500.00
What is your role in Chronic Pain? _____
One vote per Corporation

Organization or Company: _____

Voting representative Information:

Dr. Professor Mr. Mrs. Ms. Other _____

Is this address: Office Home

Membership Directory Yes No

First Name: _____ Last Name: _____

Degrees _____ Profession/Discipline _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Country: _____

Notices & Updates are distributed by email.

Email: Please print very clearly _____

Tel: _____ Fax: _____

Website: (if applicable) _____

PAYMENT

Payments can be made online at www.canadianpaincoalition.ca

January 1—June 30

Individual Healthcare Prof Core Association Academic/Prof Corporate
\$15.00 \$25.00 \$100.00 \$100.00 \$500.00

July 1—November 15

\$15.00 \$25.00 \$70.00 \$70.00 \$350.00

November 15—December 31—Applied to the following year

\$15.00 \$25.00 \$100.00 \$100.00 \$500.00

DONATIONS

Donations are welcome from any group or individual to assist the Canadian Pain Coalition with their goals and objectives. *A receipt will be issued for all donations over \$20.*

\$10 \$25 \$35 \$50 \$75 \$100

On-line donation payment option is available for the above amounts.

Other \$ _____

On-line donation payment option is not available when donating anything other than the values above.

Cheque—Payable to Canadian Pain Coalition

1143 Wentworth St. W, Suite 202, Oshawa, ON L1J 8P7

Fax—1-905-404-3727

Credit Card—By mail or fax (*Processed by Events In Sync, who is the managing company for the Canadian Pain Coalition*)

VISA MasterCard AMEX

Number: _____

Expiry: _____ CVN: _____

Name on Card: (Please print clearly)

Signature: _____

Total Payable: \$ _____

Questions?

Please contact:

Canadian Pain Coalition Office

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The CPC is not able to respond to queries about individual health problems. We do look forward to hearing your thoughts about chronic pain and your suggestions will be considered and discussed during our ongoing meetings and initiatives. Your support is "Painfully Important".