## IPAC CANADA APPLICATION FOR CORPORATE MEMBERSHIP

IPAC Canada PO Box 46125 RPO Westdale Winnipeg MB R3R 3S3 Telephone: (204) 897-5990/1-866-999-7111

Fax: (204) 895-9595

Email: info@ipac-canada.org

The undersigned officer hereby applies for Corporate Membership in Infection Prevention and Control Canada and agrees to conform to the by-laws of IPAC Canada. We have read the accompanying Corporate Relations Committee Policy 4.40 and enclose the annual Corporate Membership fee of \$2,600 for the year ending June 30, 2020. We understand that Corporate Membership must be renewed each year in order to obtain benefits outlined in the Policy.

NAME OF COMPANY:_				
URL ADDRESS		(ta	be linked from our	web site)
	ND CONTACT INFORMAT		our Corporate Mem	bers page)
CITY:	PROV/STATE:	POSTAL /ZIP	CODE:	
MAIN CONTACT NAME	: (print)			
TITLE:				
E-MAIL ADDRESS:				
PHONE:()	FAX: ()_			
	be the main contact for communic nember of IPAC Canada; however, low.			
Please state the interest you benefit from your Corpora	ur company has in infection pr te Membership:	revention and control,	and how there will l	pe mutual
membership, and any interest memberships may be purchase primary contact person for the	address of your designated represe group memberships desired are inc ed, at \$31.00 each – see exceptions i Corporate Membership, please co	cluded with Corporate M in Policy 4.40. Even if the omplete the following sect	lembership. Additional e complimentary memb	chapter
POSITION:				
ADDRESS:				
E-MAIL ADDRESS: _		TEL:		
PLEASE APPLY MY FRI I WOULD LIKE MEMBE	EE CHAPTER MEMBERSHII RSHIP IN THE	P IN:	CHAPT _ INTEREST GROU	
Paid by: ☐ Cheque ☐	IVISA   Mastercard	AMEX Discove	r Card	
Credit Card No.				
Expiry Date:	CVV# Signature:			
Cardholder's Name (please	nrint)			

Chapter membership is not compulsory for membership in IPAC Canada; however, Chapter members **must** be members of IPAC national (IPAC Canada Policy 8.60). There are 20 local Chapters of IPAC Canada (see list below). Membership in your local chapter provides invaluable networking, education and communication opportunities.

The representative (IPAC Canada member) named on page 1 is entitled to one year complimentary membership in his or her choice of one IPAC Canada chapter. Additional chapter memberships can be obtained at a fee of \$31 per chapter. For supplementary representatives' membership in IPAC Canada, kindly fill out a Membership Application Form, available at www.ipac-canada.org.

## **IPAC Canada Chapters**:

(see <a href="www.ipac-canada.org">www.ipac-canada.org</a> for geographical locations)

\*IPAC Newfoundland Labrador \*IPAC New Brunswick/PEI

\*IPAC Nova Scotia

\*PCI Qc

\*IPAC Eastern Ontario

\*IPAC Central East Ontario

\*IPAC Simcoe Muskoka

\*IPAC Ottawa Region

\*IPAC Southwestern Ontario

\*IPAC GTA (Toronto)

\*IPAC CSO

\*IPAC HUPIC (Huronia Professionals in

Infection Control)

\*IPAC Northwestern Ontario

\*IPAC Northeastern Ontario

\*IPAC Manitoba

\*IPAC PANA (Peel Region)

\*IPAC SASKPIC

\*IPAC Southern Alberta

\*IPAC Northern Alberta

\*IPAC British Columbia

## **IPAC Canada Interest Groups**

The Representative named on the previous page is entitled to membership in any Interest Groups of his or her choice.

Cardiac Care Interest Group
Community Healthcare Interest Group
Dialysis Interest Group
Environmental Hygiene Interest Group
Healthcare Facility & Design Interest Group
Long Term Care Interest Group
Mental Health Interest Group
Network of Networks
Oncology Interest Group
Pediatrics Interest Group
PreHospital Care Interest Group
Reprocessing Interest Group

Surveillance and Applied Epidemiology Interest Group