



**CASEM MEMBERSHIP APPLICATION FOR NEW MEMBER
FROM JANUARY 1, 2023 TO DECEMBER 31, 2023**

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Office Phone: _____ Ext _____

E-mail: _____ Cell _____

Gender: Male () Female () Other _____ Language: English () French ()

CASEM Website Login Information: *Please select a password for your account. Your username is your email.*
Password: _____

Public Directory Information: (If you wish your clinic listed on the public directory, complete this section)

Clinic Name: _____

Clinic Address: _____

Clinic City: _____ Province: _____ Postal Code: _____

Office Phone: _____ Ext _____

E-mail: _____ Clinic Website: _____

Specialty: _____

(A) MEMBERSHIP DUES TOTAL

- () Active Member \$ 350.00
- () Post graduate medical trainee * \$ 175.00
*Clinical Journal of Sport Medicine NOT included
- () Senior Member (retired) \$ 175.00
- () Student Member* \$ 25.00
*Clinical Journal of Sport Medicine NOT included

MEMBERSHIP CATEGORY (A) \$ _____

(B) OPTIONAL DONATION (tax deductible)

Please choose donation type: () Research Fund () L. Richard Fund () General

Total Donation: (B) \$ _____

TOTAL AMOUNT ENCLOSED

ADD LINE A+B FOR TOTAL AMOUNT PAYABLE \$ _____ (CDN)



METHOD OF PAYMENT (*CVC is the 3 digits on the back of your card)

VISA CARD NUMBER: _____ / _____ / _____ EXP DATE: / _____ *CVC: _____

M/C CARD NUMBER: _____ / _____ / _____ EXP DATE: / _____ *CVC: _____

CHEQUE NUMBER _____

TYPE OF PRACTICE (please check all that applies):

- | | | |
|--|--|---|
| <input type="checkbox"/> ... CCFP | <input type="checkbox"/> ... Fellow | <input type="checkbox"/> ... Physical Med and Rehab |
| <input type="checkbox"/> ... CCFP (EM) | <input type="checkbox"/> ... FRCP | <input type="checkbox"/> ... Sport Medicine |
| <input type="checkbox"/> ... CCFP (SEM) | <input type="checkbox"/> ... Military Medicine | <input type="checkbox"/> ... Psychiatry |
| <input type="checkbox"/> ... Emergency | <input type="checkbox"/> ... Orthopaedic Surgery | <input type="checkbox"/> ... Student |
| <input type="checkbox"/> ... Family Practice | <input type="checkbox"/> ... Pediatrics | <input type="checkbox"/> ... Other |

DISTRIBUTION OF CASEM MEMBERSHIP DATABASE

Check here if you **DO NOT APPROVE** distribution of your contact information (home numbers are NEVER published). Contact information can be distributed to National Sport Federations, CASEM Website Members' Only Section, other related organizations, sponsors, etc.

MEMBERSHIP VERIFICATION

I certify that I am a physician licensed to practice in the province of _____ registration number _____. I started practicing medicine in the year (please state year) _____

OR

I am a postgraduate medical trainee or medical student. Please supply a copy of your medical school registration.

OR

I am a senior (retired from active medical practice) in the province of _____. Life Members and Honorary Members are appointed. I _____ confirm that the information completed on this application is true to the best of my knowledge. (Membership becomes invalid immediately for false information provided on this form without refund or compensation of lost membership dues).

Signature _____ Date: _____

The Advantages of CASEM Membership include the following*:

- To gain knowledge through the network of sport medicine physicians across Canada and around the world including research and continuing medical education.
- To access current information in Sport and Exercise Medicine via the National Office.
- To be recognized as having a special interest and/or expertise in the area of Sport Medicine.
- To be able to sit the CASEM Diploma in Sport and Exercise Medicine and once qualified to use the nominal Dip. Sport. Med.
- A subscription to the Clinical Journal of Sport Medicine and the British Journal of Sport and Exercise Medicine direct online access to full-text articles (a subscription to the Clinical Journal is NOT included with the student membership fee)
- Ortho Evidence
- A bimonthly subscription to the CASEM Newsletter
- To receive reduced registration fees to all of CASEM's continuing professional development opportunities including the Annual Scientific Meeting, Team Physician Course, Advanced Sport Medicine Course, and Timely Topic Workshops.
- To have the opportunity to be selected to the medical teams for national and international competitions and work with national sport federations.
- Continued funding for research grants
- Access to the CASEM Listserv