

## APPLICATION FORM TO BECOME A **PUBLIC SUBSCRIBER**

## PLANNING INSTITUTE OF BRITISH COLUMBIA 1750 - 355 Burrard Street, Vancouver, BC V6C 2G8 Tel: 604.696.5031 | Fax: 604.696.5032 | Email: info@pibc.bc.ca

Please print or type clearly					
Contact Information:		Last Name First Name		Name	
		Street Address			
City		Provinc	е	Postal Code	
Phone (Home)		Phone (Work)		Fax	
E-mail					
Are you pro	esently a memb	er or participant in a land	use planning related	organization/committee?	
□ Yes □ No		If yes, please speci	If yes, please specify:		
Are you an	elected official	at the municipal/regional	district/provincial/fed	leral level?	
□ Yes □ No		If yes, please speci	If yes, please specify:		
Would you	like to add a C	P Subscription as well? (a	nnual CIP Fee \$99 + (	GST (Student rate \$ 22 + GST))	
□ Yes	🗆 No				
Are you a p	ost-secondary	student currently enrolled	l in a non-planning pr	rogram?	
□ Yes	🗆 No	If yes, please comp	If yes, please complete the section below and attach documentation.		
Student Inf	ormation: Plea	se provide documentation s	such as a registration r	print out or letter from your Institution to	

 Program of Study
 Institution
 Expected Graduation Date

I certify that I have read, understand & agree to comply with the bylaws of the Institute (available at: www.pibc.bc.ca), and I further certify that the information and declaration(s) provided on this form and in any attached document is true and correct.

□ I agree and consent to PIBC sending me via e-mail PIBC's electronic newsletter (PIBC e-News) and annual membership renewal invoices and notices. I understand that I may opt-out of receiving PIBC e-News at any time.

Signature of Applicant

verify your registered student status.

Date

## Enclosures:

 $\hfill\square$  Include a copy of your current resume or CV with this application.

NOTE: Separate subscription fees for *new* Public Subscribers become due and payable *prior* to formal admission.

OFFICE USE ONLY: