



150 Wood St  
 Kamloops BC V2B 0G6  
 1-250-376-4771

## CCRR Membership Form

Please complete registration form and return to above address:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Facility (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

(Please provide your email for regular updates)

TYPE OF CARE:     RLNR     Family     Group     Parent     Other

Facility License # \_\_\_\_\_ (If Applicable)

### Full Caregiver Membership (Free of Charge)

- License Family and Group
- Registered License Not Required

#### Includes

- Newsletters
- Workshops
- Use of Laminator
- Photo Copying
- Outreach package for out of town Caregivers
- Referrals

### Associate Member (Free of Charge)

Parents, Foster Parents, informal caregivers, SCD workers, substitute teachers, community agencies/ organizations and child care professionals

- Associate Member

#### Includes

- Newsletters
- Use of Laminator
- Photo Copying