

IPM Association Member Renewal/Application

Institute of **Professional Management**

Suite 2210 1081 Ambleside Dr., Ottawa, Ontario, K2B 8C8 Toll-Free: 1-888-441-0000 Fax: 1-866-340-3586 Fmail: info@workplace.ca



I am Renewing my Current M	lembership in the Association(s)	checked below.
Indicate IPM renewal invoice #_	Total:	\$

- I would like to become a Blended Member of the Association checked below. I already have a current designation/membership. I have completed my next program and have enclosed the exam responses* in hard copy with a payment of \$50 plus GST/HST for the additional designation for the current term.
- ☐ I am a current member of the Association checked below and would like to **update the information** you have on file. If you are simply updating your information, please fax or scan and e-mail this form and send it to IPM. Please treat this information as confidential and process it according to the guidelines and procedures of the current *Privacy Act*.

APRC Association of Professional Recruiters of Canada CPT Canadian Professional Trainers Association **Canadian Association of Assessment Specialists**

CMPA Canadian Management Professionals Association

For any other details, contact IPM at 1-888-441-0000 or via email at info@workplace.ca.

SCAN/E-MAIL TO INFO@WORKPLACE.CA OR FAX TO 1-866-340-3586

Name				Employer					
Position									
Business/Work Information									
Address		City	City		Province	Postal Code			
Telephone	Fax			Email (MANDATORY F	FOR ACCESS)				
Residence/Home Information									
Address		City	City		Province	Postal Code			
Telephone	Fax			Email (MANDATORY FOR ACCESS)					

Business and personal email addresses mandatory on this form for IPM office use only

*IMPORTANT NOTE:

If you are sending an exam, please mail exam responses, application and payment using

ONLY CANADA POST REGULAR MAIL.

We do **NOT** accept courier deliveries, Express Post, Priority Post or Registered/Certified mail, emailed or faxed exams. Exams are reviewed and memberships are processed within two weeks of receipt.

PAYMENT OPTIONS							
OPTION 1	1 O VISA O MASTERCARD			Date:			
Card #				Validation Code	Expiry Date (MM/YY		
Card Holder's Na	me:						
Signature:					(not valid without an authorized signature)		
OPTION 2	O Compa	any cheque, bank dra	aft or mo	oney order made	payable to IPM		

enclosed. Personal cheques NOT accepted. Mail to: IPM – Institute of Professional Management 2210-1081 Ambleside Drive, Ottawa, ON K2B 8C8