



Canadian Association of Research Administrators
Student Annual Membership Form

1. Personal Information (the fields marked with * must be completed)

First Name*:
Last Name*:
Enrolled as a student at*:
Address*:
City*:
Province*:
Postal Code*:
Telephone*:
E-Mail*:

Note: This information is used to complete your listing in the membership directory.

2. Membership

Student Membership Fee is **\$50.00** (plus the tax applicable in your province or territory). CARA's HST# is 86472 5478 RT0001

Membership Eligibility: By submitting this form to CARA you confirm that you are not employed full-time and are currently a student taking at least one course at the institution identified above.

Thank you for joining CARA!

***** THIS IS YOUR INVOICE *****

1. Please complete this form and send it as an email attachment to michelkara@gmail.com
2. Currently we can only accept cheques or receive payment through the phone for Student Membership payment. Please print this form and submit it to your Finance Department for payment. Make cheque payable to 'CARA'; a copy of this form must accompany the cheque to ensure that the payment is applied to the correct membership.

Forward payment to:
CARA | ACAAR
1710-350 Albert Street
Ottawa, ON - K1R 1B1