

2018 MEMBERSHIP FORM

Please Select One: Optometrist Optician

Last Name _____ First Name _____

Address _____ Suite # _____

City _____ Province _____ Postal Code _____

Telephone _____ E-mail Address _____

YEARLY MEMBERSHIP FEES AND BENEFITS

OPTOMETRISTS: \$109/YEAR

OPTICIANS: \$45/YEAR

Membership Benefits Include:

- ✓ **10% off Continuing Education Seminars with the Academy of Ophthalmic Education**
- ✓ **Discounted Professional Liability Insurance through Holman Insurance Brokers**
 - Optometrists: Group rates start at \$685/year (\$2 million per claim/\$6 million annual aggregate)*
 - Opticians: Group rates start at \$98/year (\$2 million per claim/\$2 million annual aggregate)*
 - Visit soepinsurance.ca for insurance policy highlights, insurance plans and rates
- ✓ **Group Pricing on Social Media & Online Review Plans with Leading Creative Services™**
 - Complimentary Social Media & Review Audit
 - Visit leadingcreativeservices.com for further details

METHOD OF PAYMENT

MasterCard Visa

Credit Card Number _____ Expiry Date _____

Authorized Signature _____

MAIL OR FAX YOUR COMPLETED FORM TO:

Canadian Society of Eye Health Practitioners
35 West Pearce Street • Unit 35
Richmond Hill • Ontario • Canada • L4B 3A9
F. 905.731.8235 • T. 905.731.6022

 **W. csehp.ca**



*Insurance Disclaimer: Professional Liability Insurance is provided by Holman Insurance Brokers and underwritten by Lloyd's or Intact Insurance. A separate insurance application form must be completed, signed and approved before coverage can be bound. Membership and payment to the Canadian Society of Eye Health Practitioners (CSehp) does not imply the binding of Professional or Commercial Liability coverage for the Member of CSehp or Holman Insurance. 8% RST is applicable to the insurance premium plus a policy fee. Insurance premium is billed separately by Holman Insurance Brokers and is not included in CSehp's yearly membership fee.