



## CBET/cdt/CDP Certification Renewal – 2015

The following is your personal information. Please review. If changes are required, and you intend to pay by cheque, make changes on the form and **sign and date** the form prior to returning it with your remittance. If you intend to pay by **Interac e-mail money transfer** (see Payment Options), add changes in the space provided by your bank's on-line banking application. Please note that none of this information is shared with any other entity unless otherwise indicated on this form.

Name:	
Cert# : Category : Certification type:	Employer: Department : Position :
<b>Primary Address for Surface Mail :</b> Address 1 : Address 2 : Address 3 : City : Province : Post Code : Country :	<b>Secondary Address</b> <small>(May be work or home but different from Primary) :</small> Address 1: Address 2 : Address 3 : City : Province : Post Code : Country :

Primary e-mail Address:	Secondary e-mail Address:
Home Telephone :	Work Telephone :

**By default all communications are sent to the Primary Surface and Primary e-mail Addresses.**

I wish to have my name and certification status posted to the "ICC Directory of active CBET/cdt/CDP's" on the ICC Web site.

Signed : \_\_\_\_\_

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

Your current status is:	RENEWAL FEES			
	Active Member		Retired Member *	
	Before March 31 <sup>st</sup> , <b>2015</b>	After March 31 <sup>st</sup> , <b>2015</b>	Before March 31 <sup>st</sup> , <b>2015</b>	After March 31 <sup>st</sup> , <b>2015</b>
Outstanding Arrears/(Credit)				
Dues for <b>2015</b>	\$60.00	\$70.00	\$30.00	\$35.00
<b>TOTAL AMOUNT DUE</b>	<b>\$ 60.00</b>	<b>\$ 70.00</b>	<b>\$ 30.00</b>	<b>\$ 35.00</b>

\* A "Retired Member" is defined as a C.B.E.T.(C)/cdt who has formally retired from working, or is no longer working in the Biomedical Engineering/Dialysis field, but wishes to maintain his/her status as a C.B.E.T.(C)/cdt.  
Note that The Board is considering periodic re-certification testing. If this is initiated, "Retired Members" wishing to be re-instated as an Active Member may be required to undergo a re-certification examination.

**Payment options:** 1. By mail, including a copy of this form, with a cheque payable in C\$ or US \$ to : 'BMET Certification Canada'  
2. By **Interac e-mail money transfer** to : [bmetcertcanada@ncf.ca](mailto:bmetcertcanada@ncf.ca) . All the major banks provide this convenient service

MAIL TO:	BMET Certification Canada, 87 Halley St., Nepean, ON, K2J 3R5
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