

Therapy Assistant Association of Alberta PO Box 29004 Edmonton AB, T6H 5Z6

www.thaaa.ca

New Membership Application

ThAAA membership year runs May 1 through April 30

*Name				
*Mailing Address				
*Province			al Code	
Tel. Number			nil .	
Employer		Туре	of Practice	
MEMBERSHIP CATEGORIES	AND FE	ES:		
Note: new members applying	after Nov	. 1 st automatically pay h	alf-price as reflected below	
- Countified Name to a	¢c= 00	Callaga adversaria	tent in OT DT CLD on Decreation and decreased in	
☐ Certified Member	\$65.00	On College educated assistant in OT, PT, SLP or Recreation and/or on-the-job trained assistant with a minimum 3000 hours of work experience under the		
			a minimum 3000 hours of work experience under the PT, SLP or Rec Therapist. Please provide a letter or	
		•	•	
☐ Practicing Member	\$50.00	copy of diploma stating above. Must be employed as a therapy/rehab assistant in OT, PT, SLP and/or Rec		
U Tractioning Member	730.00	• •	de a letter as proof of employment.	
☐ Student Member	\$20.00		college level diploma program recognized by the	
			ite for list of approved institutions). Please provide	
		proof of enrollment.		
☐ Associate Member	\$35.00	For those with an inter	rest in the profession of therapy assistants.	
☐ Out of Province Member			be members, but live outside the province of Alberta	
☐ Upgrade			ete their education mid-membership year	
		and wish to be certifie	• •	
METHOD OF PAYMENT:				
☐ Cash	□ P	ersonal Cheque	☐ Please check here if a receipt is required.	
CORRESPONDENCE:				
	via email	and failure to provide	e an email may exclude you from updates from the	
Association.		and randre to promat	The containing constant year new appeared new tool	
DECLARATION:				
	s of the <i>F</i>	Association. I verify that	all information and documentation provided is true and	
correct in every aspect.		,	,	
Signature:			Date:	

- *Please make all cheques payable to Therapy Assistant Association of Alberta
- * Mail application form, payment and appropriate documentation to the address listed on this form.
- *\$45.00 surcharge for cheques returned as NSF.

For Certified Members Only

Belonging to a professional association that grants certification identifies you as a professional partner in Healthcare. The standards to earn and maintain your status as a Certified Member will demonstrate to your colleagues, employer and other rehab professionals that you have met strict requirements to gain certification and are dedicated to participating in professional development and actively collaborating with therapists for the optimal outcome of your clients.

Competency Policy - Annual Competency Requirements

Each Certified Member is expected to adhere to the following guidelines:

- **A**) A minimum of 10 hours of documented learning opportunities each year accumulated over at least 2 different education opportunities that are relevant to your position.
- **B**) Certified members are required to set goals to develop areas of need and seek new learning opportunities each year.

Education Goals for the Upcoming Year:
1
2
Note: We will not accept mandatory job training such as CPR or WHMIS as valid education opportunities as these are requirements of your job and not additional educational opportunities required to maintain certification.
Evaluation of competency requirements Every year, 5 certified members will be audited to verify that competency requirements are being met. The Board reserves the right to ask for clarification of education opportunities and how they are relevant to your position. If education provided is deemed insufficient, additional time will be provided for the member to meet the requirements. The Board of Director's decision will be final and binding.
* Please see our website for more information on accepted education criteria under the Education tab.
I, choose to participate in the certification program provided by the Therapy Assistant Association of Alberta and agree to abide by the requirements set forth to maintain certified status. I verify that I have the necessary credentials/training to be certified as a (ie. PTA, OTA, etc or combination of)
I verify that all information that has been provided is true and correct in every aspect.