



## APB Membership Application – Affiliate Member

### What is the APB?

APB is a not-for-profit organisation that represents biology professionals practicing in Western Canada (professionals, student and retired members). Our members specialize in the study, management or conservation of living organisms and their habitats.

#### APB Promotes:

- High Professional Standards in the management, research, and education regarding B.C.'s natural resources
- Sound Management and Conservation of Biological Resources in an objective professional manner
- Professional Development and Networking by providing opportunities for mentoring and information sharing, and by sponsoring and hosting conferences/training/workshops.

#### APB makes a difference through advocacy:

The APB provides a unique service as we are able to advocate on behalf of biology professionals, guiding the dialogue with members, affiliated professional associations and other external parties (e.g.: levels of government) on timely issues.

*For more information and details on membership benefits*  
[www.professionalbiology.com](http://www.professionalbiology.com)

The Affiliate Membership category is open to any person who has an interest in biology. No formal qualifications in biology are required.

Affiliate members cannot vote on APB business or serve on the APB Board of Directors. However, they can enjoy other membership benefits offered by the Association as may be applicable, such as the mentorship program.

#### Membership requirements

1. No formal qualifications in biology are required.
2. Applicants must be at least 18 years of age.
3. Only an individual can apply for an APB membership. An organization or company cannot become a member of the APB.
4. Student applicants must provide confirmation of membership in the College of Applied Biology or documentation confirming their student status.
5. Affiliate membership applicants must sign the waiver attached, affirming that they will not represent themselves as a professional biologist or professional biology practitioner in the Province of British Columbia unless they have the required professional accreditation from an authorized accrediting organization; and will not hold APB liable if they do misrepresent their professional status.

#### APB Privacy Policy

Respecting the privacy of personal information is important to us. Please see the APB Privacy Policy on the APB website for details on how the information you provide is used by the APB.

The APB members database and website are hosted on a Canadian server. Personal information collected from APB members is subject to the privacy laws in Canada set by the Office of the Privacy Commissioner of Canada.

The necessary steps are taken to ensure our members' and sponsors' payment card data is kept secure and that they, as well as the APB, are protected against data breaches. APB uses an online engagement management system that has been validated by the PCI Security Standards Council. Compliance with the Payment Card Industry Data Security Standard (PCI-DSS) means that the Association adheres to requirements for security management, policies, procedures, network architecture, software design, and other critical protective measures.

## APB Membership Application – Affiliate Member

**Membership fee is annual and as per calendar year (Jan 1 - Dec31).**

To pay by phone with a credit card, please contact the APB office (250-483-4283).

Cheque (payable to the 'Association of Professional Biology' – address as per below).

Address: #300-1095 McKenzie Ave., Victoria, BC, V8P 2L5

Phone: 250.483.4283

Fax: 250.483.3439

Email: [registrar@professionalbiology.com](mailto:registrar@professionalbiology.com)

**Affiliate membership category – Please select one:**

(Prices include GST)

Affiliate - General \$89.25

Affiliate - Student \$26.50

### SECTION A - PERSONAL INFORMATION

First name	
Last name	
Informal first name <i>(if preferred for communications)</i>	
Home address	
City	
Province	
Postal Code	
Home phone number	
Cell number	
Email	
Alternative email <sup>1</sup>	

<sup>1</sup>Members can provide an alternative email address to be used by the APB office if the primary email account is cancelled.



**SECTION B**  
**INTERESTS AND AFFILIATIONS**

Please fill up this section if you are applying for the *Affiliate-General membership*.  
 We would like to know more about you. Please describe your main interests in biology

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If you are affiliated to the field of applied biology, either through work or through volunteer activities, please provide information on this affiliation.

Name of affiliation ( <i>organisation, group, company, other</i> ):	
Position in the organization	
Organization Address	
City	
Province	
Postal Code	

Why join the APB? \_\_\_\_\_

(e.g.: Networking – Member’s benefits – Advocacy for the use of science in policy making - General interest in Applied Biology )

How did you hear about us? \_\_\_\_\_

(e.g.: Website – Friend – Social media – APB Annual Conference – APB Webinar/Workshop – Pamphlet – Other)

**SECTION C  
INSTITUTION AND COURSE OF STUDY**

Please fill up this section if you are applying for the *Affiliate-Student membership*.

Name of school	
Address	
City	
Province/State	
Country	
Postal Code	
Degree Enrolled In	
Year(s) completed	

**Proof of Enrollment**

Are you a member of the College of Applied Biology with the status 'Student'?  Yes  No

If not, please provide a proof of enrollment in the above institution (e.g.: registration confirmation letter/receipt, or valid student ID). Please forward to [registrar@professionalbiology.com](mailto:registrar@professionalbiology.com)

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**SECTION D  
WAIVER OF LIABILITY**

See Waiver of Liability on page 5.

Thank you for supporting the Association of Professional Biology. The APB office will contact you by email to confirm your membership. If you have questions, please do not hesitate to contact the APB office.

## Waiver of Liability

I understand and acknowledge that affiliate membership in the Association of Professional Biology (APB) does not provide me with any professional accreditation, or allow me to represent myself as a professional biologist or professional biology practitioner for any purpose.

I understand and acknowledge that I must not represent myself as a professional biologist or professional biology practitioner in the in the Province of British Columbia, or in any jurisdiction where legislation prohibits such representation, unless I have the required professional accreditation from an authorized accrediting organization, such as the College of Applied Biology.

I will not hold APB liable in any way if I represent myself as a professional biologist or professional biology practitioner without the proper professional accreditation.

By submitting this application for APB affiliate membership I affirm that I have read and understand the foregoing terms and conditions and will abide by them.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

