



Recreation Professionals of Ontario

Educate ~ Engage ~ Evolve

Membership Application

**Please ensure all fields are filled out completely*

Name: _____

Home Address: _____

City: _____ Province: _____ Postal Code: _____

Email Address: _____

Home Phone: (____) _____ Work Phone: (____) _____ Fax: (____) _____

RPO Region (check one based on work region): North ____ South ____ Central ____ East ____

Facility of Employment: _____

Position Title: _____

Work Address: _____

City: _____ Province: _____ Postal Code: _____

Applying for which membership level (check one):

Professional ____ Registered Recreation Professional ____ Student ____ Business ____ Associate ____

Please send application with payment to:

Recreation Professionals of Ontario
P.O. Box 293
Port Hope, ON
L1A 3W4

Please make cheques payable to Recreation Professionals of Ontario

Professional Membership (working in field of recreation in varied healthcare settings)	\$165
Registered Recreation Professional (must have completed RRP application additionally)	\$180
Associate Member (applicant may be retired or former working recreation Professional)	\$100
Student Membership (must have proof of enrolment in full-time studies sent with application)	\$50
Business Membership (open to businesses offering products and service to recreation field)	\$200

All membership fees apply to both new or renewing applicants

Memberships last for 1 year from the date your application is processed