



**Canadian Neurological Sciences Federation (CNSF)**  
**Application for Medical Student Membership**

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

**1. Canadian University or College of Medicine:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**2. Home Address / Mailing Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Please indicate **Preferred Email Address** for CNSF communications: \_\_\_\_\_

**Supporting Documents**

We require a signed letter from your Canadian University or College of Medicine which verifies your current standing within their undergraduate program.

**Education / Professional Experience:**

| <b>Degrees</b> | <b>Institution</b> | <b>Dates</b> |
|----------------|--------------------|--------------|
| _____          | _____              | _____        |
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| _____          | _____              | _____        |

**Neurological Experience:**

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**Special Neurological Interests of Applicant:**

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**Medical Student Annual Membership Dues - \$40.00/calendar year + gst**

**We will bill you once your application is approved and set-up. Do not send money now.**

Medical Students that hold membership within the CNSF do not belong to one particular society of the Federation but globally to the CNSF. You will receive information relevant to all of the neuroscience specialties.

Our hope is that this information will assist in guiding you to your specific field of interest.

**Please submit completed application form and accompanying documents to Donna Irvin - CNSF Membership Services**

**Email:** [donna-irvin@cnsf.org](mailto:donna-irvin@cnsf.org)

**Fax:** 403-229-1661

**Mail:** 143N - 8500 Macleod Trail SE, Calgary, AB T2H 2N1

**Protection of Privacy Information**

The CNSF complies with the principles of the Personal Information Protection and Electronic Documents Act (PIPEDA). We will use the personal information collected on this form for processing your membership application. Once it is approved, unless you advise the secretariat office otherwise, we will use your contact information to: disseminate society information, conduct society business and include in the CNSF membership directory. We do not sell or rent our lists for financial gain. Other information provided on or with this form will be filed with the secretariat office.