

**Tyndale Association of Spiritual Directors – 2020/21 Membership Form 2010020120182222292019**

Please check one: 🞏 Renewal 🞏 First-time Membership

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| --- | --- | --- |
|  |  |  |
| ^ First name ^ | ^ Last Name ^ | TASD Reg. No. |

|  |  |  |  |
| --- | --- | --- | --- |
| Street Address |  | | |
|  | | |
| City | | Province | Postal Code |

Contact information: Please include the contact information you would like us to have in our Membership database.

|  |  |
| --- | --- |
| Phone – daytime / evenings | Email address |

**MEMBER INFORMATION**

**First-time Membership Applicants ONLY - please provide education qualification and attach copy of** **certificate(s)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Assn, School or Centre | Degree / Certification | Province, Country | Dates MM/DD/YY |
|  |  |  |  |
|  |  |  |  |

**ALL members please complete:**

|  |  |
| --- | --- |
| Are you currently practicing spiritual direction? | □ Yes: # of years \_\_\_\_ □ No |
| Any specialty or areas of interest: |  |
| Please check if you do sessions: | □ via phone □ via Internet |
| Geographic location(s) of practice:  **NOTE:** Members profile and photo may be  updated at any time by sending the information to our webmaster at [web@tasd.ca](mailto:web@tasd.ca) | □ *(renewal only)* All information is the same as previous year  □ *(new member OR renewal, if any info has changed):*  Practicing □ at Tyndale □ via Internet □ via Phone  □ Practicing in Ontario (list all geographic area/city/towns)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  □ Practicing outside Ontario (list city / prov / country)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you want to be listed on TASD website? | □ Yes □ No |

|  |  |  |
| --- | --- | --- |
| If the TASD is asked to recommend spiritual directors to potential directees, would you like us to pass on your name and email address for them to directly contact you? | □ Yes | □ No |

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| The TASD Board provides opportunities for members to participate at the Board, Team or Regional Meeting Level. Would you like us to contact you to discuss your interest in joining the TASD leadership? | □ Yes | □ No |

**PAYMENT INFORMATION**

**Membership Fees are for the annual period of September 1, 2020 to August 31, 2021**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Membership Level*** | ***Who is included*** | ***Fee*** | **🗸 *one*** |
| Regular | Graduated Practicing Spiritual Director | $ 50.00 |  |
| Associate | Interested in spiritual direction, not a practicing director | $ 50.00 |  |
| Internship | Tyndale Internship 2020/21student | $ 0.00 |  |
| Tyndale Internship Graduate | First year following 2019/20 internship | $ 25.00 |  |
| Student (with proof of enrollment) | Academic Institution: | $ 25.00 |  |

**PAYMENT CAN BE MADE BY CREDIT CARD VIA EVENTBRITE:**

Go to:<https://www.eventbrite.ca/e/20202021-tasd-membership-registration-tickets-115999418383> **Password = tasd**

NOTE: You will **NOT** have to pay any service charge on this payment as long you pay before October 31, 2020. Any registrations paid after this date will include the EventBrite $3.74 service fee.

**MEMBER ACKNOWLEDGEMENT**

For both **Renewal** and **First-time Memberships**, you are required to read and respond to the following two statements:

1. I have read and agree to Tyndale University’s **Statement of Faith** and the TASD’s **Code of Ethics** (go to tasd.ca and select **Professional Resources**) as the basis for providing spiritual direction. Yes □

2. I am a Certified Spiritual Director (“CSD”) with CCPC Global Inc. Yes □ No □

If **Yes**, my CSD is current Yes □ No □

|  |  |
| --- | --- |
| Director’s Full Name |  |
| Signature |  |
| Date |  |