



Change of Category Application Leave of Absence

A Leave of absence from practicing is offered to members with the approval of the Board and defined in the NBCA By-laws Section 14.

Please complete form and return to admin@nbcamembers.ca An administrative fee of \$70.00 must accompany this application for consideration by the Board. Other membership fees will apply when the application is approved.

Pay application Fee

Applicant information

Name:

Current Office Address:

Preferred Phone number:

Preferred Email:

Start Date: Anticipated Return Date:

Reason:

Details of Application

I respectfully request consideration of my application for a leave of absence from practicing.

I understand that during practice interruption, I must continue to carry professional liability protection, PLP, as provided by the Canadian Chiropractic Protective Association, CCPA, or equivalent from another insurance carrier, and provide proof of the same. In addition, continuing education requirements must be maintained.

I understand that, prior to return to active practice, I must make application for approval by the Board. Upon approval, membership dues will apply and must be paid. In addition, confirmation of PLP by CCPA or equivalent from another insurance carrier, is required prior to approval being established and proof provided of the same.



I acknowledge that I have read the Bylaws Section 14 and understand the definition of special members non-practicing and special members practicing. I understand that the approval process takes a minimum of six (6) weeks to complete

Signature:

Date