

PSNM MEMBERSHIP APPLICATION & RENEWAL

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	(Active, Associate	il 1- March 31 of each fiscal year or Corporate) with attached proof of enrolment)
ACTIVE MEMBERSH the Canadian Society of N		endent upon applying and maintaining membership in
PSNM Membership#	CSNM Membership#	
ASSOCIATE MEMBERSHIP: Non-Canadian Society of Nutrition Management members working in the industry or interested in nutrition management.		
CORPORATE MEMBERSHIP: Business or organization.		
 STUDENT MEMBERSHIP: Enrolled in an accredited Food and Nutrition Management Course. RETIRED MEMBERSHIP 		
CONTACT INFORMATION PLEASE PRINT CLEARLY		
NAME: Mr. / Mrs. / Ms. / Miss		
	(First name)	(Last name)
E-MAIL ADDRESS:		
TELEPHONE: Home	Work	Cell
FACILITY / COMPANY NAME:		
JOB TITLE:		
Please email this completed application		

info@PSNM.net

