



# College of Pharmacists of Manitoba

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## 2024 MAILING/NOTICE SUBSCRIBER APPLICATION

Last Name	First Name	Middle Name	
Mailing Address	City	Province	Postal Code
Mobile Phone Number	Work Phone Number	Work Fax Number	
E-Mail Address			

**Please note that being on the mailing subscription list does not constitute a membership of any kind with the College.**

I hereby make application as a mailing/notice subscriber with the College of Pharmacists of Manitoba to subscribe to receive College publications including the Friday Five and Newsletter for the year ending the 31<sup>st</sup> day of December 2024.

### FEES & PAYMENT

Subscription Fee	\$256.00 + GST \$12.80 =	<b>Total</b>	<b>\$268.80</b>
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When your application is received at the College office, you will be notified by email that an invoice has been generated and is ready for payment.

Payments are accepted by:

**1. Visa or MasterCard**

If you choose to pay by credit card, you will be advised to pay online through your registrant portal.

**2. Cheque**

If you choose to pay by cheque, print a copy of the invoice and mail both the invoice and cheque to the College Office. Cheque made payable to the **College of Pharmacists of Manitoba**

**Please Note: All Fees are NON-REFUNDABLE**

Signature of Applicant	Date
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