



**Introduction to Museum Studies  
Distance Learning Program  
Application Form**

**Name** (as you would like your mail addressed):

\_\_\_\_\_

**Name** (as you would like it to appear on the certificate):

\_\_\_\_\_

**Position:** \_\_\_\_\_

**Institution:** \_\_\_\_\_

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

\_\_\_\_\_

**Mailing Address** (if different): \_\_\_\_\_

\_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

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

Attach an outline of your education and experience and explain why you want to take this course.

**Registration Fees and Other Costs**

(In Canadian dollars – may be paid in \$US or GBP)

|  |                                    | <b>Developed Countries</b> | <b>Developing Countries</b> |
|--|------------------------------------|----------------------------|-----------------------------|
|  | Full provision of course materials | \$450                      | \$400                       |

Participants must be CAM members; an additional fee of \$50 (Group 1), \$35 (Group 2), \$25 (Group 3), or \$10 (Group 4) per year is required. See membership form for further details.

- Membership Renewal       New Member

**Additional Services**

Tutoring / Instructing from Secretariat **\$150**  
If tutors in developing countries are from the students' location the tutoring fee is **\$50** (up to 5 students) or **\$100** (more than 5 students). If located in another city, expenses will be considered and the fee will be agreed upon between participants and tutors.

**PAYMENT INFORMATION (fill out A or B):**

Registration and tutoring fees      \$ \_\_\_\_\_ CDN  
Membership fee      \$ \_\_\_\_\_ CDN  
Please accept my donation of      \$ \_\_\_\_\_ CDN  
TOTAL      \$ \_\_\_\_\_ CDN

**A. ATTACHED**

- Cheque       Draft Enclosed

**B. ELECTRONIC TRANSFER**

- I have/will pay via PayPal on the CAM website  
 I have/will pay via electronic bank transfer to RBC 11604 104th Ave NW, Edmonton, AB, Canada T5K 2T7; ROYCCAT2 003 05179 1014547

**Checklist** - I have included:

- Completed registration form  
 Letter from tutor  
 Letter from sponsor / employer  
 Education outline and letter with reasons for application

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Return Application Form and Other Documents to:**

Catherine C. Cole, Secretary General  
Commonwealth Association of Museums  
10023 93 Street  
Edmonton, Alberta  
CANADA, T5H 1W6  
1-780-424-2229; [CatherineC.Cole@telus.net](mailto:CatherineC.Cole@telus.net)