



**The Canadian Reiki Association**  
**Membership Application for Supportive Member Level**

Box 54570, 7155 Kingsway, Burnaby BC, Canada V5E 4J6  
T: 1.800.835.7525 or 604.669.9049 ~ F: 1.866.734.4540  
Internet: [www.reiki.ca](http://www.reiki.ca) ~ E: [membership@reiki.ca](mailto:membership@reiki.ca)

Office Use	
Date Received:	____/____/____
	MM DD YY
Membership Number:	_____
Amount Rec'd \$	_____

**Membership Year: August 1<sup>st</sup> – July 31<sup>st</sup>**  
**Membership Fee: \$30.00**

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First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

**Supportive Members are not attuned to Reiki, nor do they wish to be. Supportive Members support the efforts of the Canadian Reiki Association and wish to be a part of the movement.**

**Supportive Members need not sign the CRA Code of Ethics or the Disciplinary Action Policy Form, as they do not practice Reiki.**

**The Canadian Reiki Association sincerely appreciates this level of support and wishes to thank you for your application and membership fee.**

**This membership entitles you to a copy of our newsletter which is produced three (3) times a year. Copies may be mailed to you if you do not have access to the Internet. If you have access to the Internet, please go to <http://www.reiki.ca/> where you will be able to read the newsletter online or download and print it.**