



Dear Applicant,

Thank you for your interest on becoming a member of the Nova Scotia Podiatry Association. Enclosed with this letter are:

- Membership application form
- Application Instruction guide
- Check List
- Health Declaration form
- NSPA Standards of Practice
- NSPA Code of Ethics
- Fee Structure

Please remember to type or print when filling out the application form.

Return the completed application form and supporting documentation to:

Admin and Membership Department
Nova Scotia Podiatry Association
7001 Mumford Road
PO Box 29062
Halifax Shopping Centre
Halifax, NS
B3L 2H0

Registrar,
Nova Scotia Podiatry Association.