

Be the Wave – Membership Application

Be the Wave is produced by the JLP team to help healthcare professionals in NL develop or maintain skills in pediatric chronic disease prevention by promoting healthy, active living for children and families.

Name

E-mail address

City/Town

Phone number

Organization

Are you a healthcare professional?

- | | |
|--|--|
| <input type="radio"/> I am a family physician | <input type="radio"/> I am an occupational therapist |
| <input type="radio"/> I am a pediatrician/ped. subspecialist | <input type="radio"/> I am psychologist |
| <input type="radio"/> I am a nurse practitioner | <input type="radio"/> I am a recreation therapist |
| <input type="radio"/> I am a community/public health nurse | <input type="radio"/> I am a student; please specify _____ |
| <input type="radio"/> I am a dietitian | <input type="radio"/> I am not a healthcare professional |
| <input type="radio"/> I am a social worker | <input type="radio"/> Other _____ |
| <input type="radio"/> I am a physiotherapist | |

Are you a policy maker? Yes No Are you a researcher? Yes No

Do you have an academic affiliation? Yes No

What is your primary interest in being part of this network?

Would you like to be added to our email list to receive newsletters (3 times per year)? Yes No

Thank you for your interest in joining this network.

Please forward this form to lifestyle.program@easternhealth.ca.