

Premium Job Posting and E-Blast Application

CONTACT INFORMATION		
Name:	Phone:	
Company Name:	Extension:	
Mailing Address:		
City:	Province:	Postal Code:
Email:		

SUBMISSION DETAILS
E-blast
Subject Title:
Job Posting
Indicate the job position(s) being advertised: <i>*(please ensure that you are using the correct professional title)</i>

**As the national organization acting on behalf of sonographers across the Country, Sonography Canada strongly believes that it is in the best interests of the profession and of the Canadian health care system that the nomenclature used to describe our profession and its practitioners is applied uniformly in all instances in order that all stakeholders, from potential students to educators, practitioners, regulators, and others across the health care system have a common knowledge and understanding of what is meant when someone refers to the profession. In this regard we encourage the use of "Diagnostic Medical Sonography" or "Sonography" to describe the profession and "Diagnostic Medical Sonographer" or "Sonographer" to describe the practitioner.*

ADDITIONAL INFORMATION

- Content of job ads on our website must give precedence to Sonography Canada credentials
- Please note that we do not advertise exam-prep or entry-to-practice courses

PO Box 1220, Kemptville, ON K0G 1J0 | Toll Free Phone: 1-888-273-6746 / Toll Free Fax: 1-888-743-2952 | www.sonographycanada.ca

Follow us on  [Sonography Canada - Échographie Canada](#)

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PRICE INFORMATION

Website Posting and E-Blast \$800 + applicable taxes

Taxes are applicable to ALL above charges with the exception of outside of Canada (no tax) :

BC - 7% PST+ 5% GST

MB - 7% PST + 5% GST

ON - 13% HST

AB, SK, QC, NT, YT - 5% GST

NB, NS, NL, PE - 15% HST

PAYMENT INFORMATION

Cheque (Payable to Sonography Canada; post-dated cheques will NOT be accepted)

Money Order

MasterCard VISA

Amount:

Credit Card Number:

Expiry Date:

CVV

- - -

____ / ____
Month Year

Name as it Appears on Credit Card:

Signature of Cardholder:

APPLICATION CHECK LIST ✓

- Completed Contact Information
- Payment
- Word document of advertisement (attached to email)
- E-Mail application to address provided below
Please send to: bbresee@sonographycanada.ca

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