



British Columbia  
**Therapeutic Recreation**  
Association

**Application to be listed on the BCTRA Website  
Private Practice Listing**

Owner Name:

BCTRA Number:

(Professional Membership Required)

Company Name:

Company Website:

Checklist:

Proof of Liability Insurance

Proof of Business Licence

Disclaimer:

BCTRA does not endorse or recommend specific TR private practice and the presence of a link to the agency does not constitute an endorsement of the agency. BCTRA is not responsible for safety, service fees, service provision conditions or any aspect of the service provided by the TR service listed. It is the responsibility of the consumer to thoroughly research the mandate of each qualification of each agency and the qualifications of the agency's staff members.

I understand and agree to the BCTRA disclaimer.

Name

Signature

Date

Please submit this application and required paperwork to [Directoratlarge@bctra.org](mailto:Directoratlarge@bctra.org) for review and approval.

Note: The Private Practice listing is subject to change or removal by BCTRA at any time. Approved listings will be on the BCTRA website until March 31st each year and may be renewed.