



Application Form

MEMBERSHIP

Surname: _____ Dr. Mr. Ms. Mrs.

Given Name(s): _____

Provincial Commission(s) : _____ Other Prof. Registration(s) : _____

Company or Organization: _____

Office Address: _____

City: _____ Prov. /Terr.: _____ Postal Code: _____

Tel.: _____ Ext.: _____ Fax: _____

Email: _____ Web site: _____

Residence Address:

City: _____ Prov. /Terr.: _____ Postal Code: _____

Tel.: _____ Fax: _____

Email: _____

Mailing Preference Office Residence

Correspondence English French

If you have checked 'Office' as mailing address, please indicate if you wish your organization or company information listed in the next issue of The Member Register Yes No

Please indicate membership category applied for:

Regular - Any person holding a commission as a Canada Lands Surveyor \$320 (plus GST/HST/QST)

Optional - Annual dues to be a member of Professional Surveyors Canada (PSC)
\$299.00 (plus GST/HST/QST)

Associate - A non-CLS interested in CLS affairs and accepted as a member by Council
\$100 (plus GST/HST/QST)

Retired - A current or former member of the ACLS who is now retired
\$100 (plus GST/HST/QST)

Student - A candidate for a Commission, or a student of any branch of geomatics

Indicate Area(s) of Practice

Land Surveying Photogrammetry Hydrography Geodesy

Land Information Systems

I hereby apply for Membership

Approved by

.....
Signature

Date

.....
Registrar

Date

Please indicate method of payment:

To pay through our secure gateway, go to the "forms" section and click the appropriate icon.

Cheque enclosed MasterCard Visa

Name of Credit Card Holder: _____

Card Number: _____ **Expiry Date:** _____

CVV: _____

.....
Signature

.....
Date

Form : MEM12182019PDF

Please E-mail/Mail/Fax Application to:

Association of Canada Lands Surveyors

900 Dynes Road, Suite 100E, Ottawa ON K2C 3L6

Tel: (613) 723-9200, Fax: (613) 723-5558 e-mail: admin@acsls-aatc.ca, www.acsls-aatc.ca