

THE ASSOCIATION OF ARCHITECTURAL TECHNOLOGISTS OF ONTARIO

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REGISTRATION FORM
LECTURE SERIES & EXAMINATION
September 18th & 19th and October 17th, 2009

NAME: _____ Membership Number: _____

STREET NAME: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

E-MAIL ADDRESS: _____

PHONE #: _____ (Day) PHONE #: _____ (Evening)

PHONE #: _____ (Cell)

Please send in your completed forms before August 28, 2009 for registration.

Please select an option

OPTION A	OPTION B	OPTION C
Lecture Series & Exam: <input type="checkbox"/>	Lecture Series Only: <input type="checkbox"/>	Re-write Exam Only: <input type="checkbox"/>
➔Cheque / Money Order \$250.00 ➔Visa Credit Card \$260.00 (Includes administration fee of \$10.00)	➔Cheque / Money Order \$150.00 ➔Visa Credit Card \$160.00 (Includes administration fee of \$10.00)	➔Cheque / Money Order \$100.00 ➔Visa Credit Card \$110.00 (Includes administration fee of \$10.00)

Method of Payment Enclosed: Cheque / Money Order Visa/Master Card

Amount Enclosed: \$ _____.

Credit Card Number _____

Expiry Date ____ / ____

Name of Credit Card Holder _____

Please Print Name as it Appears On Card

Signature of Credit Card Holder _____

** Please note: Cheques returned NSF will be subject to a \$25.00 administration fee