



Reinstatement Application Form
Accredited Members



Association of Architectural Technologists of Ontario

1515 Matheson Blvd East, Ste.207, Mississauga ON L4W 2P5
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Website: www.aato.on.ca Email: aato@bellnet.ca

Please print or type the information requested:

Name: _____ AATO Membership No.: _____

Street Address: _____ No. & Unit: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____ Extn: _____

Email: _____ Fax Phone: _____

Last Years Dues Paid: _____

Brief Job Description and Years Experience: _____

Educational Institute and Course of Study: _____

Candidates Signature:

Dated:

Total Fees: \$ 400.00 (GST exempt) \$ 410.00 if paid by Credit Card

AATO REINSTATEMENT POLICY:

The Association reviews applications the first week of each month. Your cheque will not be processed unless the AATO reinstates you. Your cheque will be returned to you if your application is not accepted.

RECEIPTS: Issued after application is reviewed by Certification Board and your cheque clears our bank.

Reinstatement fees are due with this application
Payable to A.A.T.O by cheque or Visa