

Membership Application / Renewal

Company Name: _____

Address: _____

Accreditation #: _____

Company Representative(s) (Print Names)

Name	Role	Email	Phone

It is required that the company representative be in the employ of or under direct contract with the accredited corporation. If the designate or alternate are under direct contract, indicate with a (c) at the end of the name. Companies are encouraged to provide multiple representatives names; for the purpose of the distribution lists, meeting invitations, etc. However, each company has only one vote in association matters.

Your answers to the following questions are necessary to allow us to better assess membership needs.

- a) Is your accreditation applicable to all of your facilities in the province of Alberta? ____ (Y/N)
- b) What disciplines is the company accredited in?
 Building Gas Plumbing Fire Electrical
- c) What services and initiatives would you like to see the AACA undertake?

This application is a: New Member Application _____ Renewal _____

Conditions of Membership

- It is understood that association membership is dependent on:
- adherence to the association Articles of Association and bylaws
 - your accreditation being in Good Standing (with the Safety Codes Council)

The Association currently does not charge dues and does not collect revenue of any kind.

I/We the undersigned am making an application on behalf of the above mentioned corporation for membership in the Association of Accredited Corporations of Alberta (AACA)

(signature)

(printed name)

(date)

(signature)

(printed name)

(date)

(signature)

(printed name)

(date)

(signature)

(printed name)

(date)