

Other than basic firm contact information, the following will be treated as confidential:

***Identification – for display on the online directory***

Member Name: \_\_\_\_\_

Employer: \_\_\_\_\_

Membership Type: \_\_\_\_\_

**CONFIDENTIAL INFO FOR INTERNAL USE ONLY:**

Billing e-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

AAA membership number: \_\_\_\_\_

If Student Member, please provide details of enrollment (i.e. educational institution enrolled at, program of enrollment, year of study, year of graduation from program):

Please e-mail completed form to: [connect@consultingarchitects.ca](mailto:connect@consultingarchitects.ca)  
An INVOICE for dues will be sent upon receipt of the completed form.