



# Alberta Assessors' Association

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[membership@assessor.ab.ca](mailto:membership@assessor.ab.ca)  
[www.assessor.ab.ca](http://www.assessor.ab.ca)

## Application for Membership - Associate

*An Associate Member is any person who has demonstrated an interest in the practice of assessment as determined by the Registration Committee and has been sponsored by an Accredited Member (Policy 80-8, Sec.2.1)*

In accordance with Policy 80-8, Membership Categories, I hereby make application for membership in the **Alberta Assessors' Association** as an unregulated Associate Member

Name: \_\_\_\_\_  
Last Name First Name Salutation

Business Address: \_\_\_\_\_  
Street City Postal Code

Bus Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Bus Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City Postal Code

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Preferred Mailing Address:  Business  Home Birthdate: \_\_\_\_\_  
Year/Month/Day

My interest in Assessment is

\_\_\_\_\_

I am currently employed in the \_\_\_\_\_ field:

Employer

\_\_\_\_\_

Job Title

\_\_\_\_\_

Length of time in present position

**An Accredited Member must sponsor an Associate Membership Application.**

*Please refer to page 3 for Sponsoring Member confirmation.*

How did you hear about the Association?

Brochure  Website  College/University  Family/Friend  Career Fair  Other \_\_\_\_\_

Membership dues are payable on March 1 for each membership year as follows:

Membership Type	Fee*	5% GST	TOTAL
Accredited	\$460.00	\$23.00	\$483.00
Candidate	\$385.00	\$19.25	\$404.25
Associate	\$385.00	\$19.25	\$404.25
Municipal Property Tax Administrator	\$200.00	\$10.00	\$210.00
Student	\$0.00	\$0.00	\$0.00

\*Note: Fees are prorated to one half of the prescribed annual fee between September 1 and November 30 and to one quarter from December 1 to the end of the membership year.

I certify that the information submitted in and with this application is correct and true. I agree, if accepted, that I will be governed by the bylaws and constitution of the Alberta Assessors' Association and promote its objectives as long as I continue to be a member.

I consent to the Alberta Assessors' Association the use of my name, address, employer name, membership type, phone number, fax and email address for such purposes as promotion of membership, membership directory listing, website listing, government liaison (Alberta Municipal Affairs, AMA), education, new products and services, internet information and networking at all levels, local, provincial and national. Consent includes the receipt of emails, bulletins and information sent or forwarded by the Association on behalf of the Association, its statutory and discretionary committees, Associate affiliates and partners.

I **Do Not** consent to the above:

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Membership Fee + GST (# 12223 4610 RT) are:

Enclosed **OR**  
 Please Invoice \_\_\_\_\_

*All cheques are payable to the Alberta Assessors' Association.*

Membership is deemed to commence on the date the application is accepted by the Registration Committee.

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**For Office Use:**

Date Application Approved by Registration Committee: \_\_\_\_\_

User Name \_\_\_\_\_ Membership Number \_\_\_\_\_ Password \_\_\_\_\_

Invoice # \_\_\_\_\_

## Accredited Member Sponsor

A sponsoring Accredited Member may or may not be a supervisor, co-worker or colleague.

A sponsoring Accredited Member is expected to assure the sponsored Associate member's application and status is consistent with Policy 80-8, Membership Categories; that the sponsored Associate member has an interest in assessment, but is not preparing assessments or practicing assessment as defined in the *Municipal Assessor Regulation (s. 1(j))*.

A sponsoring Accredited Member should periodically contact a sponsored Associate member to ensure his or her membership status remains appropriate and to promote the Association by verifying the interest in the assessment profession.

Sponsorship continues regardless of changes to position, place of employment or employment status.

Name of sponsor \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Signature of sponsor \_\_\_\_\_