

MEMBERSHIP FORM

Main Contact Person

The contact person is noted on all invoices and the billing contact is copied.

Name:

Position:	·		
Organization/Company: _			
Address:			
City:	Province:	Postal Code:	
Email:	Phone N	Phone Number:	
Billing Contact Person			
Name:			
Email:			
Members who are include	ed with the Group Membership,	will each receive all CPAA	
communications. List here	e with name(s) and email addre	ss(es):	
Memberships are valid fro	om January 1 to December 31 e	each year GST not applicable	
Group (\$250/year) □	Individual (\$100/year) 🗆	Student (\$25/year) □	
An invoice will be emailed	to the Main Contact Person.		
Cheques are payable to t	he Community Planning Associ	iation of Alberta. Direct deposit	
and e transfers are accep	ted. Credit card payment is nov	v available using the CPAA	
Member online form: CPAA	A Membership Renewals CPA Albert	<u>a</u>	
GST is not applicable.			

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