

THE MANITOBA ASSOCIATION OF ARCHITECTS

SUITE 101 - 177 LOMBARD AVENUE WINNIPEG MANITOBA R3B 0W5 PH: (204) 925-4620 FAX: (204) 925-4624 EMAIL: info@mbarchitects.org

APPLICATION FOR ASSOCIATE MEMBERSHIP

NAME IN FULL (F	PLEASE PRINT):		
RESIDENCE ADDRESS:		NO. & STREET	
	CITY	PROVINCE	POSTAL CODE
PHONE NUMBER	R (RES):		
PRESENT EMPL	OYER:		
EMPLOYER'S AD	DDRESS:	NO. & STREET	
	CITY	PROVINCE	POSTAL CODE
PHONE NUMBER	R (BUS):		
PREFERRED MAILING ADDRESS: RESIDENCE			BUSINESS
DATE OF BIRTH (MTH/DAY/YR):			
EMAIL ADDRES	S:		
DEGREE (S):	(1)		
	(2)		
FROM:	(1)		IN
	(2) (UNIVERSITY OR SCHOOL OF ARCHITECTURE)		IN (MONTH & YEAR)

PLEASE ATTACH PHOTOCOPY OF DEGREES AND CERTIFICATION OF ACADEMIC QUALIFICATIONS.

MAIL APPLICATION TO: THE MANITOBA ASSOCIATION OF ARCHITECTS

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(YOU WILL BE INVOICED FOR MEMBERSHIP DUES AFTER YOUR APPLICATION HAS BEEN ACCEPTED.)