

This form is online at www.alsa.ab.ca

Application for Qualifying Examination

Name: _____

Address: _____

Postal Code: _____ E-mail: _____

Telephone: _____ Fax: _____ Articled to: _____

I hereby apply to attend the Qualifying Examination on in Calgary Edmonton.

Examination Fee: \$200 plus GST **Please Note: The examination fee is non-refundable.**
Please pay by cheque or VISA.

Cheque enclosed for \$ _____ plus GST \$ _____ for a total of \$ _____ (GST #R106693690)

VISA Cardholder Name: _____

VISA # _____ Expiry Date _____

Please return to
Alberta Land Surveyor's Association
1000 Phipps-McKinnon Building
10020 – 101A Avenue
Edmonton, AB T5J 3G2
Fax: (780) 429-3374 E-mail: stecyk@alsa.ab.ca

FOR OFFICE USE ONLY

Qualifying Examination Date _____