

APPLICATION FOR MEMBERSHIP

Mr. Mrs. Ms. Ind. Dr.	Membership Year:
Name:	City/Prov:
Address:	Postal Code:
Phone:	Email (Home):
Date of Birth:	Gender:
Employer:	Position:
Business Address:	City/Prov:
Phone (Bus.):	Email (Bus):
Referred by:	Referring Person's Email:

CATEGORIES OF MEMBERSHIP: Check the category that applies to you. All prices include HST.

Registered Medical Laboratory Technologist	Student Memberships for \$24 +HST (\$27.12) Non-Voting
Registered Medical Laboratory Technologist - Active \$139.99 + HST (158.19)	Medical Laboratory Technology (MLT) Program Name of School: _____
Registered Medical Laboratory Technologist - Inactive \$115.99 + HST (131.07)	Medical Laboratory Assistant/ Technician (MLA/T) Program Name of School: _____
Medical Laboratory Assistant /Technician	Other Memberships - Non-Voting
Certified Medical Laboratory Assistant/ Technician - Active \$134.99 + HST(152.54)	Affiliate - \$106 +HST (\$119.78)
Certified Medical Laboratory Assistant/ Technician - Inactive \$110.99 + HST(125.42)	
Memberships for \$38.99 +HST (\$44.06)	Notes:
Retired Medical Laboratory Technologist Retired Medical Laboratory Assistant/ Technician	<i>All categories are annual memberships that will expire December 31 each year. Membership fees are not prorated. Fees are non-refundable and non-transferable.</i>

By proceeding with payment of your membership fee, it is implied that you understand and consent to receiving all information from the MLPAO

Payment Options	
Online at www.mlpao.org/membership	Cheque or Money Order payable to MLPAO
Send me a link to pay by Credit Card	

HST # R107800906