

## VERIFICATION OF REGISTRATION REQUEST FORM

Section 1 – HANDLING INSTRUCTIONS			
Distribution method	Sent directly to registrant		Send directly to the third party requiring verification (indicated in section 3 below). An email copy will also be provided to the registrant
Verification required by (mm/dd/yy)			
Section 2 – REGISTRANT			
Name of Registrant			Designation(s) CA CGA CMA CPA
Registrant Category:	Member	Professional Accounting	Firm Professional Corporation
Street address			
City			Province
Postal Code			Email
Section 3 – THIRD PARTY seeking verification (if applicable)			
Name of Third Party			To Whom It May Concern
Business name			
Street address			
City			Province
Postal Code			
Section 4 TVDE OF VERIFICATION (select one)			
Section 4 – TYPE OF VERIFICATION (select one)			
SHORT FORM	Provides the registrant's current standing (including conditions and restrictions, if any) and date of admission. PLEASE NOTE: Professional Accounting Firms and Professional Corporations can only receive this type of verification.		
LONG FORM	Provides information on how the registrant's designation was obtained (e.g., university degree, practical experience, exam requirements, etc.) as well as information regarding the registrant's specific means of admission to membership. The long form will also indicate the registrant's current standing (including conditions and restrictions, if any) and date of admission.		
Section 5 – AUTHORIZATION			
I authorize CPA Alberta to release the information as indicated in the above request for verification of registration.			
Signature of Registrant Date			
PAYMENT (if applic	able)		
Current Registrant	. (0.40.)		Former Registrant
	No Charge Normal processing (3-10 business days)		\$50 (plus GST) Short form or long form (normal or rush processing)
\$50 (plus GST) Rush processing (48 hours)			(normal of rush processing)
Accepted methods of payment and submission:			
Email: No charge verifications can be emailed to verify@cpaalberta.ca  By Cheque: Payable to CPA Alberta and attach a copy of this form . Please send to the address below.			
Edmonton Calgary 1900 TD Tower 10088 – 102 Avenue 444 – 7 Ave SW Edmonton, AB T5J 2Z1 Calgary, AB T2P 0X8			
By Credit card		· · · · · ·	

By Phone: 1-800-232-9406 and request for the Finance department to provide your credit card information. Submit the completed form to verify@cpaalberta.ca.

document and upload the completed copy of this form.

Online: Please log in online to the member portal using your CPA Alberta Membership credentials and navigate to **Other Fee Payments** menu. Select **verification of registration** under the payment type and enter the **payment amount** (system will auto calculate your GST). Navigate to **supporting**