

MEMBERSHIP 200/21 APPLICATION 200/21

Please fill out the form below. Mail your completed form along with a cheque (if applicable) to: ADTO, 7181 Woodbine Ave., Suite 235, Markham, ON L3R 1A3. Or return the form with credit card info by fax to 416-798-2613 or by email to info@adto.ca. Thank you.

2020/2021 Annua			ull-Membersh	nip	• • • • • • • • • • • • • • • • • • • •	•••••	\$696.00	
(Membership is \$551.89	nbership is \$551.89 plus 13% HST and \$72.36 of PLI)						*Indicates required fields	
*Are you aware of liability insurance	iability Insurance any facts or circumsta ? [If your answer is "Ye r not a claim report should	ances, which m s", it is imperative	that you immediate	ly notify the Assoc	iation's broker to	◯ Yes	○ No	
*Date: DD/	MMM/YYYY	*Signature:						
NOTE: New member	s must complete a sepa	rate Errors & On			_			
RDT#: Supervising RDT *Last Name: *Name of Business: _	Cab owner (# o	of employees *Given Name:) OPractice	es in-house for	a dentist OH eferred Name: _	olds DD de	esignation	
		*Province:						
*Tel.:()								
Please check box	to authorize us to she to confirm your free x if mailing address is ferent from above):_	s subscription t s the same as b	to the members- usiness address	only ADTO <i>Ben</i>				
City:	Province:	Postal	Code:	Alternate tel (if different from above	e):		
*METHOD OF PAYME	NT (Please choose or	ne): Are you	using the ADTO	fee guide?	Yes No	0		
CHEQUE (made)	payable to the Associ	ation of Dental	Technologists of	f Ontario)				
○ VISA ○ M	lasterCard (CARD #:			Exp. Date:	MM	YYYYY	
Name on Card:			Signatu	ıre:				

Remember after July 31st, 2020 there will be a \$90.40 (\$80 + HST) penalty for late renewals. Absolutely NO exceptions, this will be enforced.

NOTES: Renewal is for one year (September 1, 2020 to August 31, 2021). Upon acceptance of your application and receipt of the annual fee, mandatory liability insurance will be provided to full members only. Membership is a yearly commitment; it has privileges as well as responsibilities. Your signature above signifies that you stand in agreement with our Mandate and its responsibilities. All receipts will be mailed to YOU. For a copy of our privacy policy, please visit www.adto.ca.

7181 Woodbine Ave., Suite 235, Markham, ON L3R 1A3 • Tel: 416-742-ADTO (2386) • Email: info@adto.ca • www.adto.ca