



The Association of Professional
Engineers and Geoscientists of Alberta

LEGAL NAME CHANGE REQUEST

CURRENT LEGAL NAME REGISTERED WITH APEGA: _____

MEMBER #: _____

- Professional Member
- Member in Training
- Professional Licensee
- Examinee/Student

Legal Name Change From _____

Legal Name Change To _____

Please include **ONE** of the following with your name change request:

- I have enclosed a copy of my marriage certificate
- I have enclosed a copy of my legal name change certificate
- I have enclosed a copy of my birth certificate (for returning to maiden or birth name)

Date: _____ **Signature:** _____

Email: membership@apega.ca

Mail: APEGA
2200 Scotia Centre
700 2 St SW
Calgary AB T2P 2W1
Attention: Membership Coordinator