

## Recertification Payment Form

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Institution: \_\_\_\_\_ ASATT Membership No. \_\_\_\_\_

**Recertification Fee:** Quarterly Member \_\_\_\_ \$100

One Year Member \_\_\_\_ \$100

Two Year Member \_\_\_\_ \$0

Non-Member \_\_\_\_ \$450

After December 31<sup>st</sup>, include \$75 late fee

**Credit Card:** VISA / MASTERCARD / Discover / AMEX (circle one)

**Credit Card Number:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_ Security Code \_\_\_\_\_

**Authorized Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

ASATT • 7044 South 13<sup>th</sup> Street, Oak Creek, WI 53154-1429 • PH (414) 908-4942 Email: certification@asatt.org