

Membership Application

Sign-up or Renew your membership even faster at www.autismontario.com!

New Renewal _____
Membership #

I am/would like to be a member of:

Chapter _____

Member at Large (No Chapter affiliation)

Salutation: _____ Name: _____

Salutation: _____ Name: _____

Name(s) as it/they will appear on membership card

Organization (if applicable): _____

Address: _____

City: _____

Prov: _____ Postal Code: _____

Home Phone: () _____ - _____

Alt Phone: () _____ - _____

E-Mail: _____

Yes, please add me to your e-newsletter

Your membership includes:

- Membership card
- Welcome package for new members, with information on research, treatment and services
- A one-year subscription to *Autism Matters*, Autism Ontario's quarterly magazine that focuses on ASD topics, opportunities, and successes from across the province
- Voting rights at local Chapter and provincial member meetings
- Regular emails/notices of special events, relevant ASD information and research updates
- Mutual support and connections with others through affiliation with your local Chapter
- Preferential pricing:
 - 20% off Autism Ontario handbooks, videos, etc.
 - Discounts on training workshops and event fees
 - Other local Chapter benefits (*Please contact your local Chapter for details*)



Membership Type:

General \$50

Professional or Researcher \$90

Group or Agency \$250*

* Includes one voting member, 3 copies of each *Autism Matters* issue and opportunities for up to 3 to attend Autism Ontario events at preferred rates.

I would also like to make a donation of:

\$25 \$50 \$100 \$200 Other \$ _____

To: General My Chapter

Total payable (membership + donation) \$ _____

Support options and memberships are not eligible for charitable tax receipts. Tax receipts will be issued for donations of \$20.00 or more.

Cheque – made payable to *Autism Ontario*

VISA MASTERCARD

Card #: _____

Name on Card: _____

Expiry Date: _____

Signature: _____

Renew online at: www.autismontario.com

Mail this form to:

Autism Ontario
1179 King Street West, Suite 004
Toronto, ON M6K 3C5
Phone: (416) 246-9592 or 1-800-472-7789

Fax this form (credit card only) to:
(416) 246-9417