



Helping autistic children and their families

**MEMBERSHIP FORM – 2018**

Renewal ( ) New ( ) \_\_\_\_\_ Date: \_\_\_\_\_

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>Postal Code:</b>	
<b>Telephone: (h)</b>	<b>(w)</b>	<b>(cell)</b>
<b>Email:</b>		
<b>Can we email the newsletters and announcements to you? (Please circle) Yes No</b>		
<b>How did you hear of Children at Risk?</b>		

**MEMBERSHIP FEE:**

- 1. Individual / Family\* \$40.00 ( ) \* One vote per membership
- 2. Professional / Agency \$80.00 ( )

(\*Note that partial years will be prorated to 1 full year + partial for January 1<sup>st</sup> renewals)

**DONATION:** I would like to make a donation of:

\$1,000 ( ) \$500 ( ) \$200 ( ) \$100 ( ) \$50 ( ) \$30 ( ) Other \$ \_\_\_\_\_

**TOTAL PAYABLE:** \$ \_\_\_\_\_

**MODE OF PAYMENT:**

- 1. Cheque ( ) Please make cheque payable to “Children at Risk”
- 2. Credit card (please indicate): VISA \_\_\_\_\_ Master Card \_\_\_\_\_ American Express \_\_\_\_\_
- 3. Bank Email Etransfer ( ) Send to [ursula@childrenatrisk.ca](mailto:ursula@childrenatrisk.ca) Use Password: Membership

**CREDIT CARD INFORMATION (IF NEEDED):**

Credit Card Number: \_\_\_\_\_  
 Cardholder Name: \_\_\_\_\_  
 Expiry Date: \_\_\_\_\_

**Tax receipts issued for donations \$20 or more only.**