



# Kerry's Place Autism Services & Kerry's Place Residential Services Membership Application / Renewal Form

Please complete form and mail your payment to 34 Berczy Street, Suite 190, Aurora, ON L4G 1W9

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

		Quantity	Total
<input type="checkbox"/>	Regular Membership	\$20.00 each x _____	= \$ _____
<input type="checkbox"/>	As a member, I would like to make a one-time donation in the amount of:		+ \$ _____
	<b>Total amount of membership fees + donation:</b>		= \$ _____
<b>If purchasing more than one membership, please indicate the name of additional member(s):</b>			

**Method of Payment**

Visa       MasterCard       Cheque (made payable to Kerry's Place Autism Services)

Card Number \_\_\_\_\_ Expiry \_\_\_\_\_ CVN \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature: \_\_\_\_\_

**Membership details:**  
 Enrolment grants dual membership in Kerry's Place Autism Services (Kerry's Place) and Kerry's Place Residential Services (KPRS) and voting rights at respective Annual General Meetings (AGM). Memberships are valid for one (1) year and expire on December 31. Memberships purchased between *January 1 and July 31* are valid for the *current* calendar year. Memberships received between *August 1 and December 31* are valid until the end of the *next* calendar year. Eligibility to vote at the Kerry's Place and KPRS AGMs require membership fees to be paid in full 45 days in advance of AGM dates.

**Monthly Giving** A monthly donation to Kerry's Place is a simple and effective way of showing your support.

**Yes!** I would like to become a monthly donor to Kerry's Place      Monthly Donation: \$ \_\_\_\_\_

Please process my monthly donation using the following method:

Pre-authorized cheque (attach void cheque)      Signature: \_\_\_\_\_

Same credit card as indicated above      Date: \_\_\_\_\_

**Our Privacy Statement:**  
 Kerry's Place Autism Services is committed to protecting the privacy and the confidentiality of the personal information collected by Kerry's Place from our members and donors. Please indicate your wishes below.

Do not publically acknowledge my donation.

Do not include me on your mailing list.