



2014 INFORMCANADA MEMBERSHIP APPLICATION FORM Jan-Dec

SECTION A | Organization Information (if Individual Application write individual's name)

Organization Name:			
I&R Program Name			
Agency Web site:			
Primary Contact:			
Title:			
Phone:		E-mail:	
I&R Contact Name:			
Title:			
Phone:		E-mail:	
Mailing Address:			

SECTION B | Choose the appropriate rate for membership, includes membership with AIRS

2014 Membership Rates (Organization membership includes ABC's of I&R and access to Taxonomy)

<input type="checkbox"/> Nonprofit Annual operating budget <i>more than</i> \$75,000	\$625
<input type="checkbox"/> Nonprofit Annual operating budget \$75,000 or less	\$350
<input type="checkbox"/> For profit	\$1,425
<input type="checkbox"/> Individual (<i>member service only available; ABC's of I&R and Taxonomy not included</i>)	\$100

SECTION C | Taxonomy Agreement

Read Taxonomy Agreement [>>](#)

YES, I have read the terms of the **Subscription Agreement** and agree to comply with the terms set out therein

Note: Please inquire if wanting Taxonomy only. All inquiries welcome at info@informcanada.ca

SECTION D | Payment

Cheque -- *Please make cheque payable to InformCanada and return to address below*
or Credit Card --- **Master Card** **Visa** **American Express**

Credit Card Number:

Expiry Date:

Amount paid:

Cardholder's Name on Card:

Signature:

Mail application with payment to:
 InformCanada 235 Martindale Rd, Unit 10 St Catharines, ON L2W 1A5
 Fax: 905-682-4314; Email info@informcanada.ca; www.informcanada.ca