

## 2020 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:   |  |         |  |
| Phone:             |  | E-mail: |  |
| I&R Contact Name:  |  |         |  |
| Phone:             |  | E-mail: |  |
| Mailing Address:   |  |         |  |

PLEASE NOTE THIS IS REQUIRED TO BE COMPLIANT WITH THE CANADIAN ANTI-SPAM LEGISLATION (CASL)

☐ Yes, the above emails can be used for membership benefit information. By checking you are allowing the emails provided above to be used to receive membership information, including but not limited to conference information, newsletters, renewals, AGM and special meetings. You can unsubscribe at any time.

### SECTION B | Choose the appropriate rate for membership, includes membership with AIRS (fees subject to change)

2020 Membership Rates (Organization membership includes AIRS Training Manual and access to Taxonomy)

|                                                                                                                              |         |
|------------------------------------------------------------------------------------------------------------------------------|---------|
| <input type="checkbox"/> Nonprofit   Annual operating budget <i>more than</i> \$75,000                                       | \$675   |
| <input type="checkbox"/> Nonprofit   Annual operating budget \$75,000 or less                                                | \$400   |
| <input type="checkbox"/> For profit                                                                                          | \$1,475 |
| <input type="checkbox"/> Individual ( <i>member service only available; AIRS Training Manual and Taxonomy not included</i> ) | \$150   |

### 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](mailto: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, E-mail or Fax application with payment to:  
 InformCanada, 1910 St-Laurent Blvd, PO Box 41146, Ottawa, ON K1G 1A4  
 613-683-5400 ext 5510, Fax: 613-761-9077, Email: [info@informcanada.ca](mailto:info@informcanada.ca),