



# Associate Membership Registration Form



The C.Y.O. is a registered not-for-profit agency. All of the programs and services we offer children are funded through corporate and personal donations, foundations, grants, service contracts, event fees and our Associate Membership program.

As a not-for-profit organization, Revenue Canada and our Corporation's bi-laws state that members of our community serve as Associate Members.

A minimum annual fee of \$50.00 is required by each Member. All funds go directly to support the programs and services offered by the Catholic Youth Organization for the children we serve.

## What are the Benefits of becoming an Associate Member:

In addition to your Associate Membership Fee being **100%** tax deductible, Associate Members also receive:

- Associate Members are entitled to vote on the direction and activities of the C.Y.O. during each Annual General Meeting, provided they are members at the time of the meeting.
- Your Membership ensures the C.Y.O. continues its mission to serve the 40,000 plus children and their families that access our programs and services each year.
- Your Membership will maintain the C.Y.O.'s charitable donation status as a non-profit agency with Revenue Canada.
- You will receive annual updates on important C.Y.O. programs and operational initiatives.
- You and a guest are invited to the C.Y.O.'s Annual General Meeting and Appreciation Dinner - at no cost!
- Associate Members are given the opportunity to nominate individuals to receive the Jim Hughes Lifetime Member Award for their contribution to the C.Y.O.

Yes, I would like to become an Associate Member of the C.Y.O.

### Your Contact Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Membership Payment Options:

The minimum amount we are asking to become an Associate Member of the C.Y.O. is **\$50.00**. However, we have included the option of giving more should you wish to increase your support.

**\$50.00** Other Amount: \$ \_\_\_\_\_

Please invoice me at the address provided.

Enclosed is my cheque payable to: C.Y.O. Associate Membership, 5999 Chippewa Road, Mount Hope, ON L0R 1W0

Please charge my Members to: Visa MasterCard

Credit Card #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

*Once we receive your registration form and payment you will receive a confirmation package with your tax receipt.*

Children are at the heart of our mission.

