



People In Motion

... opening doors today to create a better tomorrow for people with disabilities.

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NON PROFIT
CORPORATE
LIFETIME

MEMBERSHIP APPLICATION

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE _____ POSTAL CODE _____

TELEPHONE: RESIDENCE _____ BUSINESS _____

FAX: _____ TDD/TTY _____

E-MAIL _____

CONTACT PERSON: _____

POSITION: _____

MEMBERSHIP CATEGORY: NON PROFIT Membership \$ 25.00 Enclosed \$ _____

CORPORATE Membership \$ 25.00 Enclosed \$ _____

LIFETIME Membership \$500.00 Enclosed \$ _____

* **DONATION** Enclosed \$ _____

* Donations of \$500.00 or more automatically confers a lifetime membership. Cheques should be made payable to People In Motion.

Signature

Date

FOR OFFICE USE ONLY **NEW** _____

CARD & RECEIPT _____ DATE _____ CHEQUE _____ CASH _____ RENEWAL _____