



**DOWN SYNDROME
ASSOCIATION OF PETERBOROUGH**

291 Charlotte Street, Unit 3,
Peterborough, Ontario K9J 2V6
Phone # 705-749-6695 Fax # 705-749-5864
Toll Free 1-866-656-9677
www.downsyndromepeterborough.ca
Charitable Registration Number 86149 5547 RR0001



MEMBERSHIP APPLICATION

Renewable August each year

- If you are renewing your membership - please check here**

Membership Dues - please check one:

- General Membership** **\$20.00**
- Subscriptions to Newsletter ONLY** **\$10.00**
- Donation of \$ _____ Thank you!**

**** General Membership in good standing is entitled to vote.**

If you would like us to send correspondence (newsletters etc.) by email, please provide us with your email address: _____

Please return this application to the address above and make cheques payable to the Down Syndrome Association of Peterborough.

Family Name _____
 Organization Name _____
 Parents' Names _____
 Contact Name _____
 Address _____ City _____ Postal Code _____
 Day Phone # _____ Evening Phone # _____
 Email Address _____
 Son/Daughter's Name _____ Age _____ Birth Date _____
 Sibling's names (at home) & ages _____
 Son/Daughter's Interests _____

Your son/daughter's present program involvement with other organizations/agencies
