



Family Supports Institute Ontario Membership Application Form

Name/Contact Person

Organization

Mailing Address

Phone Numbers

Email

Permission to publicize name on our membership list: Yes No

How many sites do you operate?

How many total staff work at your program(s)?

(Include staff working directly with families and those managing and administering programs).

FULL PAYMENT MUST ACCOMPANY MEMBERSHIP FORM

Please mail cheque payable to: Family Supports Institute Ontario

100 Wheatfield Road
Toronto, Ontario
M8V 2P8
Phone: 416-819-4746
Email: fsio.ontario@gmail.com

Membership fees:

Agency \$100

Individual Friends and Supporters \$80

Full-time Student \$25

Please indicate your affiliation:

EarlyON Child and Family Centres	<input type="checkbox"/>
CAPC-CPNP programs	<input type="checkbox"/>
Military Family Resource Centres	<input type="checkbox"/>
Community Health Centre	<input type="checkbox"/>
Community Mental Health Centre	<input type="checkbox"/>
Centre or Home-based Childcare	<input type="checkbox"/>
Child Welfare Agency	<input type="checkbox"/>
Other:	<input type="checkbox"/>