Autism Nova Scotia Membership Registration Form



Membership Information:

Name of Member: Address Phone Email		Organization (applicable to Professional & Organization Members)				
		City/Province		Postal Cod	Postal Code	
				O New Me	ember ership Renewa	
If th	nis is a family membership, what are the oth	er family men	nber names to a	dd to your membe	ership?	
	embership Options and Annual Ference select your membership type: AUTISTIC INDIVIDUAL Annual Fee: \$5 Self-identified or diagnosed individual on the spectro		Annual Fee: \$10 Available to any st	STUDENT udent currently enrol	led in school	
	Annual Fee: \$15 Option for Volunteers and Community members we wish to make a difference	□ //ho	Annual Fee: \$25 Applicable to all fa	FAMILY members living i	n the same	
	PROFESSIONAL Annual Fee: \$50 Option for educators, clinicians and other profession working in the field	onals	Annual Fee: \$10	nesses and organizati	ons committed	

Please email the completed form to membership@autismns.ca or you can register through our website.

If the cost is a barrier for you to become a member of Autism Nova Scotia, please email us at **membership@autismns.ca** for support.