



# Trinidad & Tobago Association of Ontario

Camille's Place, 202-4983 Rathkeale Road Mississauga, Ontario L5V 2B3

TTAO Membership Application Form			
Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.			
Name:			Month of Birth:
Current Address:			
City:	Prov:	Postal Code:	
Email:	(H):	(C):	
Children (under 18)			
Name:	D.O.B.	Age:	<input type="checkbox"/> M or <input type="checkbox"/> F
Name:	D.O.B.	Age:	<input type="checkbox"/> M or <input type="checkbox"/> F
Name:	D.O.B.	Age:	<input type="checkbox"/> M or <input type="checkbox"/> F
Name:	D.O.B.	Age:	<input type="checkbox"/> M or <input type="checkbox"/> F
Committees			
I am interested in the following committees:			
<input type="checkbox"/> Communication / Media	<input type="checkbox"/> Events	<input type="checkbox"/> Membership	
<input type="checkbox"/> Socio – Cultural	<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Children / Youth Program	
<input type="checkbox"/> Financial	<input type="checkbox"/> Senior Programs	<input type="checkbox"/> Other:	
Membership Type and Payment Details			
<input type="checkbox"/> \$20.00 – Individual	<input type="checkbox"/> \$50.00 - Family	<input type="checkbox"/> Volunteer / Donation	
Signature			
By joining TTAO membership, you earned participation in activities and monthly meetings. TTAO will welcome any suggestions into consideration by members. The information provided above will only be used to keep for contact and keep you informed.			
Name:	Signature:	Date:	
TTAO Office Use Only			
Fees / Year	Payment Received	Office Signature / Date	
Fees for Year:      to	<input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Email		
Fees for Year:      to	<input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Email		
Fees for Year:      to	<input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Email		
Fees for Year:      to	<input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Email		
Fees for Year:      to	<input type="checkbox"/> Cash, <input type="checkbox"/> Cheque, <input type="checkbox"/> Email		

Please send completed forms along with payment to: [info@tntaon.com](mailto:info@tntaon.com)

Or mail to:

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 Mississauga, Ontario L5V 2B3