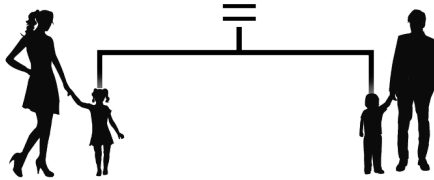


# Membership & Donation Form

# Equal Parenting Party Of Ontario

Sold By: \_\_\_\_\_

Date Received: \_\_\_\_\_  
yy / mm / dd



One Huge Issue: Impacts Everyone

I would like to:       volunteer       receive EPP mail       receive a tax receipt

## 1. Membership

Personal Information (existing members are asked to update contact Information as needed)

Last name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Tel (res): \_\_\_\_\_ Tel (other): \_\_\_\_\_

Email: \_\_\_\_\_

Member Type	Individual	Family	Family Memberships – 14+ yrs. Of age
<input type="checkbox"/> New	<input type="checkbox"/> 1 Year - \$10	<input type="checkbox"/> 1 Year - \$20	_____
<input type="checkbox"/> Renewal	<input type="checkbox"/> 2 Year - \$20	<input type="checkbox"/> 2 Year - \$40	_____
	<input type="checkbox"/> 3 Year - \$30	<input type="checkbox"/> 3 Year - \$60	

## 2. Donations

Amount \$ \_\_\_\_\_ Type    \_\_\_ One Time Donation    \_\_\_ Monthly

**Note:** Elections Ontario does not allow us to assume membership. We cannot deduct funds given as a donation to cover membership costs; you must indicate a membership renewal in the Membership section above.

## 3. Method of Payment

Payment Type       Cash     Visa     MasterCard     Cheque     Pre-Authorized Payment

Credit Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

For Pre-Authorized Payment, attach VOID cheque and provide signature here: \_\_\_\_\_

For cheques, please make payable to the Equal Parenting Party.

4. Totals	Membership fees: \$ _____	Ontario Tax Credit	Maximum allowable contribution to the party: \$9,975
	Donations: \$ _____	• 75% of amounts up to \$399.	Maximum allowable credit: \$1,330
	<u>Grand Total:</u> \$ _____	• 50% of amounts between \$399. & \$1330.	
		• 33.3% of amounts between \$1330. & \$3026.	