

ACO Port Hope / Membership Form

New _____ / Renewal _____

Please enrol me, or renew my membership to this Branch of the Architectural Conservancy of Ontario. I have indicated below my/our applicable membership category.

Name(s) _____

Address _____

Telephone # _____ e-mail _____
(please print clearly)

I give permission for ACO to contact me electronically Yes _____

<i>Fees and Donations</i>	<i>Amount</i>
Individual	\$40
Household (of 2): for each additional member add \$10.	\$50
Full-time Student	\$20
Emerging Professional (5 year term)	\$20
Donation: <i>membership is free for individuals who donate a minimum of \$1,000 in the calendar year.</i>	
Total Enclosed	

Would you be interested in volunteering at one of our events ?

Yes _____ *eg. garden or house tours, BBQ, Christmas, walking tours, etc.*

Payment Options:

1. Etransfer – from your bank’s Interac service, add the address etransfer@acoporthope.ca – please provide your email and mailing address in the message box and indicate that the payment is for membership fee and/or donation.
2. Cheque – mail your cheque with this completed form, payable to **ACO Port Hope** at P.O. Box 563, Port Hope, ON L1A 3Z4.