



Mood Disorders Association of Ontario

Membership

I would like to become a member / renew my membership with MDAO

\$25

Donations

I would like to support the work of MDAO with my charitable donation of:

- \$50 will provide the materials for one participant in an educational group
- \$75 will purchase a new resource for our lending and reference library
- \$100 will train one volunteer who will provide support on the MDAO warm line
- \$_____ to support work where the need is greatest

I would like to support MDAO with easy monthly gifts:

\$10 \$20 Other \$_____

Name _____

Address _____ Apt. # _____

City _____ Prov. _____ Postal Code _____

Email address _____

Membership \$25.00

Donation \$_____

Total: \$_____ Mastercard Visa Cheque

For Credit Card Payment:

Name:	
Card Number:	
Expiration:	Signature:

Note: Membership fees are not eligible for a tax receipt. Donations will be acknowledged with a charitable tax receipt for the full amount. Charitable number 13097 8570 RR0001 **Thank you.**

The Mood Disorders Association of Ontario sincerely appreciates your membership and gifts. **Please return this page to MDAO by fax: 416-486-8127 or mail to: 36 Eglinton Avenue W. # 602 Toronto, ON, M4R 1A1 tel: 416-486-8046**