



New Member Registration

Instructions:

Please fax this completed form to 902-665-2769, and you will be invoiced shortly. For billing questions, please contact our Treasurer, Elizabeth Rice at (902) 665-2635.

Contact Information:

Organization: _____

Mailing address: _____

Town: _____ Postal code: _____

Website address: _____ Fax: _____

Information for person representing the organization

Name: _____ Position: _____

Phone: _____ Email: _____

Type of Membership (please select one):

Full Voting Member

Social enterprises [including for-profit and non-profit co-operatives, nonprofits, charities and private companies] who commit to supporting ACCSE's purpose and values. One membership per organization.

Annual dues (Please select one):

- Annual revenue under \$100k \$75
- Annual revenue \$100-\$500k \$150
- Annual revenue \$500k to \$1 million \$200
- Annual revenue \$1-5 million \$300
- Annual revenue more than \$5 million \$500

Associate [Non-voting] Member

Individuals and organizations not representing a social enterprise but who want to support ACCSE and the work we do. Unless otherwise stated, one membership per organization.

Annual dues (Please select one):

- Individual \$50
- Annual revenue under \$1 million \$250
- Annual revenue \$1-5 million \$500
- Annual revenue more than \$5 million \$750