



DONATION FORM

I wish to make a contribution of \$30 \$60 \$90 Other \$ ____, to support:

A. The Sponsored Membership Program: Support first-time ISAAC memberships for individuals who promote and encourage the use of AAC and who live in developing countries. Sponsored Membership covers two years for a donation of \$30.

\$ _____

B. Conference Attendance for People who use AAC and their Families:

Your donation will support an individual to attend an ISAAC Conference.

\$ _____

C. Conference Attendance for People from Emerging AAC Countries:

Your donation will sponsor an individual to attend an ISAAC Conference.

\$ _____

D. Other donation to (please specify): _____

\$ _____

METHOD OF PAYMENT

Cheque in Canadian funds enclosed. Please make your cheque payable to ISAAC and mail to ISAAC, 312 Dolomite Drive, Suite 2016, Toronto, ON M3J 2N2 Canada.

For orders originating from outside North America, bank drafts/money orders free of bank charges in Canadian funds are requested.

Credit card payment: VISA MasterCard

Credit Card Number: _____ Expiry Date (month/year): _____

Name on Credit Card: _____ CVV (3 digits on back of card): _____

Signature: _____

Please provide your address details below for mailing of donation acknowledgement:

Donation receipt requested

Name: _____

Address: _____ City: _____

Province/State: _____ Postal/Zip Code: _____ Country: _____

Tel: _____ Fax: _____ Email: _____

Total Donation: _____

Thank you! Your support for ISAAC's worldwide efforts to enhance the use of AAC strategies and technology is immensely valued and appreciated.