

MEMBERSHIP | TAXONOMY APPLICATION FORM



Membership|Taxonomy Applicants

Fill out **ALL** sections

The Canadian Taxonomy of Human Services Applicants

Fill out **ONLY** sections A, B, C, D, H, I and J




2008 Members renewing must Fill at a minimum Sections A, B, C, F, H and I

SECTION A Organization Information	
Organization Name:	
I&R Program Name <i>(if different)</i> :	
Membership #	
SECTION B Contact Information	
Executive Name:	
Title	
Phone:	E-mail:
I&R Contact Name:	
Title	
Phone:	E-mail:
Address	
Mailing Address <i>(if different)</i> :	
Phone:	Fax:
Agency E-mail:	Agency Web site:

Mail application with payment to:

InformCanada, c/o Information Niagara, 301 St Paul St, Box 1, St Catharines, ON L2R 3M8

Fax: 905-682-4314 | e-mail: info@informcanada.ca

SECTION C Applicant Information		
<input type="checkbox"/> New member of InformCanada/AIRS Membership in InformOntario is included for Ontario organizations	<input type="checkbox"/> <i>Optional</i> Membership in InformOntario for non-Ontario organizations	
<input type="checkbox"/> Membership Renewal	<input type="checkbox"/> Taxonomy Renewal	<input type="checkbox"/> Taxonomy only
SECTION D Type of Organization		
Operating since (year):	Providing I&R since (year):	
<input type="checkbox"/> Independent Nonprofit	<input type="checkbox"/> Municipal/Regional Government	
<input type="checkbox"/> For profit	<input type="checkbox"/> Federal Government	
<input type="checkbox"/> United Way	<input type="checkbox"/> Provincial Government	
<input type="checkbox"/> Volunteer Centre	<input type="checkbox"/> Other, specify:	
SECTION E Type of Service		
Please select one which best describes the overall I&R Program		
<input type="checkbox"/> Comprehensive	<input type="checkbox"/> 211 Centre	<input type="checkbox"/> Library
<input type="checkbox"/> Crisis	<input type="checkbox"/> 211/311	<input type="checkbox"/> Other
<input type="checkbox"/> Specialized I&R		
Language of Service		
<input type="checkbox"/> English	<input type="checkbox"/> French	<input type="checkbox"/> Others, specify:
I&R Hours of Service		
Monday to Friday am to pm		
<input type="checkbox"/> 24 hours a day / 7 days a week		
<input type="checkbox"/> Extended evening hours / # of weekends, specify:		
<input type="checkbox"/> Extended evening hours / including weekends, specify:		
<input type="checkbox"/> Other, specify:		
Total Annual Inquiries	Latest available (year)	Total Inquiries

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SECTION F | Funding Information

Annual I&R Budget

<input type="checkbox"/> Less than \$75,000	<input type="checkbox"/> \$75,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000
<input type="checkbox"/> \$500,001 to \$1,000,000	<input type="checkbox"/> \$1,000,001 to \$2,000,000	<input type="checkbox"/> Over \$2,000,000

Funding Sources

United Way %	Products/Services %	Fundraising %
Municipal %	Federal %	Provincial %

Other, specify:

SECTION G | Other Information

Please describe your organization or program's service (max 500 words)

SECTION H | Choose the appropriate rate to your organization's membership and legal status

2009 Membership Rates (includes access to Taxonomy)

Nonprofit Annual operating budget <i>more than</i> \$75,000		
<input type="checkbox"/> I took advantage of the introductory special in 2008 (\$550 per year) and paid my 2009 membership fees at that time		
<input type="checkbox"/> 2009 Fees	<input type="checkbox"/> Please Renew my Taxonomy subscription	\$625
<input type="checkbox"/> I would like to subscribe to the Taxonomy		
<input type="checkbox"/> Nonprofit Annual operating budget <i>less than</i> \$75,000		\$350
<input type="checkbox"/> For profit		\$1,425
<input type="checkbox"/> Individual (<i>member service available only to individual</i>)		\$100
Non Member (Taxonomy only)		
<input type="checkbox"/> Nonprofit Annual operating budget <i>more than</i> \$75,000		\$450
<input type="checkbox"/> Nonprofit Annual operating budget <i>less than</i> \$75,000		\$250
<input type="checkbox"/> For profit		\$700

Note: Inquiries from Government entities about the Taxonomy are welcome. Single government users subscribe at the nonprofit rate. To discuss fee structure for multiple users please contact us at info@informcanada.ca.

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SECTION I Taxonomy Agreement	
<p>Read Taxonomy Agreement >></p> <p><input type="checkbox"/> YES, I have read the terms of the Subscription Agreement and agree to comply with the terms set out therein</p>	
SECTION J Data Collaborative	
<p>What database software are you using?</p>	<p><input type="checkbox"/> CIOC <input type="checkbox"/> Other, specify</p>
<p>Are you part of a local data collaborative?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If yes, please provide the name of the collaborative?</p>	
<p>Are you the lead/coordinator of a local data collaborative?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Please list the partners in the collaborative:</p> 	
SECTION K Payment	
<p><input type="checkbox"/> Cheque -- <i>Please make cheque payable to InformCanada and return to address below</i> or Credit Card --- <input type="checkbox"/> Master Card <input type="checkbox"/> Visa <input type="checkbox"/> American Express</p>	
<p>Credit Card Number:</p>	
<p>Expiry Date:</p>	<p>Amount paid:</p>
<p>Cardholder's Name on Card:</p>	
<p>Signature:</p>	

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