

**CLANS AND SCOTTISH SOCIETIES OF CANADA - NEW MEMBER APPLICATION 2022-2023**



[www.cassoc-cesedc.ca](http://www.cassoc-cesedc.ca)

Please complete and return by email to [secretary@cassoc.ca](mailto:secretary@cassoc.ca) with instructions on how you wish to pay the \$50 CAD membership fee. Payment may be made by one of the following methods:

1. Request a formal invoice for payment by cheque or money order;
2. Interac e-mail funds transfer to [treasurer@cassoc.ca](mailto:treasurer@cassoc.ca). Note that payment will be shown as to the CASSOC Chair William Petrie during the transfer. No security question or answer is required. Please indicate in the Interac message your name and organization that the payment is for.
3. PayPal 1: Use <https://www.paypal.com/ca/for-you/transfer-money> to safely send your payment to [treasurer@cassoc.ca](mailto:treasurer@cassoc.ca).
4. PayPal 2: Email us tasking for a funds request to whom is to receive invoices and payments as indicated on your completed membership information form.
5. PayPal 3: For a credit card through PayPal, use <http://www.cassoc.ca/memberrenewpt.htm>

**OFFICIAL NAME:** \_\_\_\_\_

**Organization Details**

Website: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Postal Code/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Organization Size (est.) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please send updated social media links to [info@cassoc.ca](mailto:info@cassoc.ca)

Each member organization is requested to appoint a delegate and alternate for the following duties:

- Liaison and representation with the CASSOC Board and attendance at General Meetings
- Provide relevant updates on information and activities of the organization
- Distribute to organization members the CASSOC newsletter, meeting notices and minutes as well as all other applicable announcements and correspondence

**OFFICIAL DELEGATE (Contact info to be in the Members' Directory):**

**NAME:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Postal Code/Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Organizational Position of Delegate: \_\_\_\_\_

**ALTERNATE (Contact info to be in the Members' Directory):**

**NAME:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Postal Code/Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Organizational Position of Alternate Delegate: \_\_\_\_\_

**HEAD OF ORGANIZATION (IE CHAIR/CHIEF/CEO):**

*Change* NAME:

E-mail address: \_\_\_\_\_

**NEWSLETTER EDITOR :**

*N/A*

NAME: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**MEMBERSHIP CONTACT (Contact info to be in the on-line Members' List):**

*N/A*

NAME: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Code: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Newsletters and notices are sent to the Delegate, Alternate, Head of Organization and Editor.  
To Whom else? NAMES & E-MAILS IF NOT LISTED ABOVE.**

*N/A*

**To Whom should the membership renewal notices be sent?**

NAME: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**To Whom should receipts be sent?**

NAME: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**To Whom should the updated "Member of CASSOC" sign be sent?**

NAME: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Completed by: (*Required*) \_\_\_\_\_ Date: (*Required*) \_\_\_\_\_**

**Privacy Policy: CASSOC is committed to maintaining the accuracy, confidentiality, and security of information you have provided to us. The information provided on this form will be used only for the specific purposes indicated unless prior permission for additional use is first obtained from you. CASSOC will list your organization and website link on CASSOC websites, newsletters, and other publications. Please contact [secretary@cassoc.ca](mailto:secretary@cassoc.ca) for questions, enquiries or instructions with regards to this form and the handling of the information you are providing.**