



Transplant Advocate Association
PO Box 3, Kingston Main
Kingston, ON K7L 4V6

Application for Membership

OUR MISSION: To provide support, knowledge and encouragement to those touched by organ and tissue transplantation; and to inform the public about the need and benefits to others of organ and tissue donation.

Name:

Address:

Postal Code:

Email:

Phone Number:

I give TAA permission to circulate, within the association, my name and the information I have provided on this application.

Annual Membership Fee of \$10 for 1 January to 31 December each year. This form can be digitally submitted & membership fee e-transferred to give@transplantadvocateassociation.ca.

Signature of Applicant:

Date:

TAA sends transplant anniversary cards. Participation is optional.

My transplant is:

Date of transplant:

All discussions are confidential. TAA members do not give medical advice.

Email: info@transplantadvocateassociation.ca

Web: www.transplantadvocateassociation.ca

TAA is a Registered Volunteer Charity in Canada since 2006

Business # 83524 0128 RR0001