



Application for Membership

New
 Renewal

The information collected will be used to update your Agency Profile which will be included in the ONESTEP membership Directory and Website. *Please ensure the information you provide is current and approved by your organization.*

Organization	
Incorporated Name	
Common / Program Name	
Staff Contacts - Please provide both the name and email for the following: (Please Print)	
<u>Name</u>	<u>E-mail</u>
<ul style="list-style-type: none"> Executive Director: 	
<ul style="list-style-type: none"> Contact Person: 	
<ul style="list-style-type: none"> Alternate Contact: 	
Street Address	
City, Province, Postal Code	
Agency Phone #	
Agency Fax #	
Agency Email	
Website	
Communities Served	
Groups Served	
Services Provided	
Community Development	

**Please provide a list of your Organization's Program and Service locations
(including satellite offices). You may duplicate this form as needed.**

Agency Name:	
Address:	
City:	
Postal Code:	
Telephone:	Fax:
List the person to be designated as your contact to ONESTEP for this location:	
Name of Contact Person/Title:	
E-mail:	

Agency Name:	
Address:	
City:	
Postal Code:	
Telephone:	Fax:
List the person to be designated as your contact to ONESTEP for this location:	
Name of Contact Person/Title:	
E-mail:	

Agency Name:	
Address:	
City:	
Postal Code:	
Telephone:	Fax:
List the person to be designated as your contact to ONESTEP for this location:	
Name of Contact Person/Title:	
E-mail:	

Please ensure that the following portion of the Application for New Membership or Membership Renewal is signed by your Agency's Executive Director or a Member of the Board of Directors.

Agency Name:

We are applying for renewal of our membership in ONESTEP. Through this Application we acknowledge that our Agency is aware of, supports and will actively seek to engage and demonstrate our commitment to ONESTEP's Mission and Principles.

Name:

Title:

Date:

Signature: _____


Please enclose the following:

1. A copy of your Agency's most recent Annual Report, including an audited Financial Report. *(New Membership only)*
2. A copy of your Agency brochure. *(New Membership only)*
3. A copy of your Agency's by-laws (if there have been any amendments in the past year). *(New Membership only)*
4. Payment for the applicable membership fee (see schedule below).

MEMBERSHIP FEE SCHEDULES

Not for Profit Career and Employment, Training or Literacy/Basic Skills Agencies, Training Trust Funds (that supply employment related supports) in operation for a minimum of 2 years And organizations affiliated with the sector e.g. workforce training boards, colleges, municipal social services departments, community services		
Select	Agency budget	Full Membership Fee
<input type="radio"/>	For agencies with a budget of up to \$ 50,000	\$ 90.00
<input type="radio"/>	For agencies with a budget of up to \$ 100,000	\$ 170.00
<input type="radio"/>	For agencies with a budget of up to \$ 200,000	\$ 220.00
<input type="radio"/>	For agencies with a budget of up to \$ 500,000	\$ 330.00
<input type="radio"/>	For agencies with a budget of up to \$ 750,000	\$ 450.00
<input type="radio"/>	For agencies with a budget of up to \$ 1,000,000	\$ 550.00
<input type="radio"/>	For agencies with a budget of up to \$ 2,000,000	\$ 850.00
<input type="radio"/>	For agencies with a budget over \$ 3,000,000	\$ 925.00
<input type="radio"/>	For agencies with a budget over \$ 5,000,000	\$1,550.00
<input type="radio"/>	For agencies with a budget over \$ 6,000,000	\$1,700.00
<input type="radio"/>	For agencies with a budget over \$ 8,000,000	\$1,750.00
<input type="radio"/>	For agencies with a budget over \$10,000,000	\$1,900.00

Completed Applications may be returned to ONESTEP via the following methods:

 **Mailed** with cheque to ONESTEP, 116 Industry Street, Toronto ON M6M 4L8

THANK YOU!