

# Membership & Renewal Form



Canadian Celiac Association  
1450 Meyerside Dr. Suite 503 Mississauga, On L5T 2N5  
Phone: 905-507-6208 Toll Free: 1-800-363-729 Web: [www.celiac.ca](http://www.celiac.ca)  
Email: [info@celiac.ca](mailto:info@celiac.ca) Charitable Registration: #10684 4244 RR0001

Joining the CCA is the best way to improve your quality of life and to benefit other Canadians with celiac disease or gluten sensitivity. Receive national monthly e-newsletters along with a New Member Kit including a Pocket Dictionary of ingredients, and discounts on products and services. Your membership runs from the last day of the month you join until the same day the following year. Please allow a minimum of two weeks for the delivery of your New Member Kit or updated Membership Card.

## Section A: Contact Information (new and renewing members)

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Your membership includes the option to join a local chapter at no additional fee.

Yes, please affiliate me with the following local chapter. (Check one)

<input type="checkbox"/> Vancouver, BC	<input type="checkbox"/> Edmonton, AB	<input type="checkbox"/> Ottawa, ON	<input type="checkbox"/> Moncton, NB
<input type="checkbox"/> Victoria, BC	<input type="checkbox"/> Regina, SK	<input type="checkbox"/> Kingston, ON	<input type="checkbox"/> Fredericton, NB
<input type="checkbox"/> Kelowna, BC	<input type="checkbox"/> Manitoba	<input type="checkbox"/> Toronto, ON	<input type="checkbox"/> PEI
<input type="checkbox"/> Calgary, AB	<input type="checkbox"/> Thunder Bay, ON	<input type="checkbox"/> Quebec (English only)	<input type="checkbox"/> Halifax, NS
		<input type="checkbox"/> Saint John, NB	<input type="checkbox"/> Newfoundland

If you do not select a chapter, you will be assigned to the national office.

## Section B: Demographics (new members only)

In order to assist us with statistical research, please provide us with the following information (optional). If the membership is for your child or dependent, please fill in the information for that person.

Basic Demographics

Gender:  Male  Female Year of Birth: \_\_\_\_\_

This membership is for a child under 16 Child's name \_\_\_\_\_

Diagnosis:

Celiac Disease  Dermatitis Herpetiformis  Gluten Sensitivity  Wheat/Gluten Allergy

No Formal Diagnosis

Other medical condition (which one) \_\_\_\_\_

Other People in your Family One membership covers everyone in your household. How many people, other than you, are being served by this membership? \_\_\_\_\_

Section C: Membership Options (new and renewing members)

New Members      Renewing Members

One Year                       \$65                       \$50

Donation (Optional)

The CCA uses donations to provide services beyond that covered by basic membership fees including advocacy with government agencies, regulators, food and drug manufactures and other association and providing awareness, peer support and education initiatives.

Membership fees provide less than 25% of the income we need to sustain our efforts. Donation receipts are issued for donations of \$25 or more, unless a receipt is specifically requested.

Donation Amount:     \$25     \$50     \$100     \$250     Other \_\_\_\_\_  
 Please keep my donation anonymous

Monthly Donation:     Please contact me to set up a monthly donation

Legacy Donation:     I would like someone to contact me (including insurance)

Donating Securities     I would like information on how to donate securities (stock, mutual funds, etc.)

Payment

Membership Amount	
Donation Amount	
Total Amount:	

Payment Method:

- Cheque made payable to the Canadian Celiac Association
- For credit card payments, please call 1-800-363-7296 ext. 225 to join or renew your membership or you can join online at [www.celiac.ca](http://www.celiac.ca).

Signature: \_\_\_\_\_

[Privacy Policy](#)

The Canadian Celiac Association (CCA) is committed to protecting the privacy and personal information of its donors, volunteers, employees and other stakeholders and adheres to all Canadian Legislative requirements with respect to individual privacy. Completion of this application constitutes your acceptance of the Canadian Celiac Association's Privacy Statement. The information you provide will remain strictly confidential and will not be disclosed to third parties except under non-disclosure to service providers who assist us with delivering service. We will share your personal information with our local chapter leaders in order to provide services and communicate information about the activities of the CCA and your local chapter. For our complete Privacy Policy please refer to our website [www.celiac.ca](http://www.celiac.ca) or call 905-507-6208 or 1-800-363-7296 for a print copy.