



# Application for Membership

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RisingOaks Early Learning Ontario is incorporated under the Canada Not-for-Profit Corporations Act and is also a registered charity. As a result, RisingOaks is governed by a volunteer Board of Directors. The Board is accountable to the members of RisingOaks. Members are individuals (not families) who meet the criteria established in the by-laws. Each person applying for membership must submit his or her own application form.

## MEMBERSHIP DUES

The General Operating By-law No. 3 (section 4.01) notes that *There shall be such annual dues payable by Members for membership in the Corporation as determined by the Board from time to time.* Currently, the Board has set the membership dues at \$0. Please note that the Board will provide 45 days' notice to members of any such changes to fees.

## BENEFITS OF MEMBERSHIP

Members play a significant role in RisingOaks' governance. Benefits of becoming a member include:

- Receive notice of and be eligible to vote at the Annual General Meeting
- Have the right and responsibility to elect the Board of Directors
- Invited to participate in members-only surveys or focus groups to have a voice in setting the future direction of RisingOaks.

Full rights and responsibilities of membership are set out in the General Operating By-law No. 3 available on the website (<https://www.risingoaks.ca/by-laws>).

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**Yes, I am interested in becoming a member of RisingOaks Early Learning Ontario.**

**Member Contact Information:** (please print)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

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

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## CONFIRMATION OF MEMBERSHIP ELIGIBILITY

Membership is open to any individual who meets all of the criteria below. Please check each box that applies to you to confirm you meet the criteria:

- I am 18 years of age or older
- I am interested in furthering RisingOaks' Mission and Vision and wish to engage with the Board of Directors (e.g., at the Annual General Meeting, through surveys or focus groups, etc.) in doing so.

Plus, check one or more of these two options:

- I am on the Board of Directors (if not, leave blank)
- I have at least one child in my care/custody who is currently enrolled in at least one of RisingOaks' programs for which I pay monthly fees to RisingOaks for those services (or am approved for fee subsidy).

Youngest Child's  
Name:

Program:

Centre

I give RisingOaks permission to send emails to me regarding the Annual General Meeting (AGM), Members only surveys, and other member-related news and activities.  Yes  No

Signature

Date

(Click on Tools, Fill & Sign, then choose the Sign icon to type or draw your signature)

You will remain a member of RisingOaks for so long as you meet the eligibility criteria or until you submit a request to cancel your membership. Additional information on Membership Termination can be found in the By-laws, section 4.02 and 4.03.

**Head Office Use Only:**

**Date Received:** \_\_\_\_\_

Date of Acceptance: \_\_\_\_\_

Date of Decline: \_\_\_\_\_

Confirmation sent to applicant

Notes: \_\_\_\_\_

Member added to register

\_\_\_\_\_

Submit your completed form to the centre supervisor or send by email to [lprospero@RisingOaks.ca](mailto:lprospero@RisingOaks.ca)