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Autism Society of PEI

Family Membership Form 2025 – 2026 (Dates April 1st, 2025-March 31st, 2026)

Date: _____

Individual or Family Name(s): _____

Mailing Address: _____

Email: _____

Home Number: _____ Work Number: _____

Name of Family Member on Autism Spectrum _____

Age: _____

Additional Family Member on Autism Spectrum: _____

Age: _____

Additional Family Member on Autism Spectrum: _____

Age: _____

Family Membership fee is \$50.00 per year and is inclusive of all members of the immediate family.

_____ Cheque payable to “Autism Society of PEI”

_____ Cash

_____ E-Transfer- Transfers sent to Nathalie@autismsociety.pe.ca

_____ Interac (We accept only debit tap at the Autism Society office for membership payments)

Additional Notes: Is there anything else the Autism Society can do to help you and your family?

Autism Society of PEI Photo Consent Form

Throughout the year, the Autism Society of PEI hosts many family events, fundraisers, volunteer activities, programs and supports.

Occasionally at these events, we will have photographers taking event photos. By signing below, you are consenting to allow you and your family to be photographed at any Autism Society events throughout the 2025-2026 year.

I give my consent for my family to be photographed at Autism Society events and for these photo's to be used as promotional material through Autism Society promotional outlets.

Name (Signing on behalf of above family)

Date