



ISAAC Donation Form

I wish to sponsor an ISAAC member in an emerging country for one year through the Sponsored Membership program at a cost of \$28.

\$ _____

I wish to make a contribution of \$25 \$50 \$100 Other amount to support:

People who use AAC & their families
(sponsor an individual to attend ISAAC Conference)

\$ _____

People from emerging AAC Countries
(sponsor an individual to attend ISAAC Conference)

\$ _____

Other Donation to: _____

\$ _____

Thank you!

Please scroll down for payment information.



International Society for Augmentative and Alternative Communication

METHOD OF PAYMENT

[] Cheque in Canadian funds enclosed. Please make your cheque payable to ISAAC and mail to ISAAC, 49 The Donway West, Suite 308, Toronto, ON M3C 3M9 Canada. For orders originating from outside North America, bank drafts/money orders free of bank charges in Canadian funds are requested.

[] Credit card payment: VISA Master Card

Credit Card Number: _____ Expiry Date: _____

Name on Credit Card: _____ Signature: _____

Please provide your address details below for mailing of donation acknowledgement:

[] *Donation receipt requested*

Name: _____

Address: _____ City: _____

Province/State: _____ Postal/Zip Code: _____ Country: _____

Tel: _____ Fax: _____ Email: _____

TOTAL PAYMENT	\$
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