



**Tear off and mail to: S.P.O.H.T.. Box 53120. 10 Royal Orchard Blvd..  
Thornhill. Ont. L3T 7R9**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

If a Corporation, please print full name and contact person, with title

**ANNUAL FEES:** Corporate: \$50 Family: \$30 Individual: \$20 Life : \$250

Make cheque payable to: S.P.O.H.T Payment Enclosed: \$ \_\_\_\_\_

I would like to volunteer (state particular interest) \_\_\_\_\_

Please call me to discuss. Tax Receipts for fees and donations issued in February