



TORONTO SCHOOL ADMINISTRATORS' ASSOCIATION
Fairmeadow Centre, 17 Fairmeadow Avenue, Room 100, Toronto, Ontario M2P 1W6
Tel: (416) 393-0861 Email: tsaaoffice@tdsb.on.ca

Associate Membership Registration Form 2023-2024
(Please Print)

Name: _____

Position/Location: _____

- Superintendent Retired Resigned from Board
 Maternity/Parental Leave Unpaid Leave of Absence

Home Address: _____

City: _____

Postal Code: _____

Phone: _____

Cell : _____

Email: _____

Personal Email: _____

Associate Membership

I wish to become an Associate Member of the Toronto School Administrators' Association. This membership is available to former Principals or Vice Principals.

I understand that the annual fee for this membership is \$75.00 and allows for me to attend social functions. I am aware this membership does not include the TSAA Annual Conference. Should I choose to attend the TSAA conference, I understand that additional fees must be paid in advance of the conference.

Any changes in the constitution or fee structure will be subject to a vote at the Annual General Meeting.

(signature)

(date)

Payment of Associate Membership Fees

Associate Membership

- Associate Membership will be available to members who have retired, resigned, are on an unpaid leave, on maternity or paternity leave or have been promoted to Superintendent within the Board. The annual fee for the Associate Membership is \$75.00.
- Associate members may attend TSAA social functions.
- Associate Membership fee **does not** include attendance at the TSAA Annual Conference. Associate Members who wish to attend the Annual Conference, are required to pay an additional fee in advance to attend. Please contact the TSAA office for details.

Please note:

Membership is on an annual basis and expires on August 31 of each year.

PAYMENT OF ANNUAL ASSOCIATE MEMBERSHIP FEES 2023-2024

ASSOCIATE MEMBERSHIP:

- Please find enclosed my cheque made payable to **TSAA**, for **\$75.00** in payment of my annual Associate Membership fee.
- E-transfer of **\$75.00** and copy of scanned registration form has been sent to tsaaoffice@tdsb.on.ca

Date: _____ Signature: _____

Canada Post
TSAA – Fairmeadow Centre
17 Fairmeadow Avenue
Room 100
Toronto, Ontario
M2P 1W6

Inter-Office Mail
TSAA
Fairmeadow Centre
Room 100
RTE: NE