



ASSOCIATION LIFE MEMBERSHIP

QUALIFICATIONS

A Home & School Association wishing to honour a **member for outstanding service** to the Association may confer a Life Membership in the Association.

PROCEDURE

1. The Association conferring the Life Membership shall provide the Federation with the full name of the recipient (as it should appear on the certificate), the name of the Association and a brief summary of the member's service to the Association.
2. The Association shall submit a cheque for \$100.00 payable to the Ontario Federation of Home & School Associations.
3. The Federation will provide the Association with an *Association Life Membership* certificate and an *Association Life Member* pin.
4. The Life Membership will be presented at a meeting or a special event of the Association.



PRIVILEGES

A Life Member in an Association shall have the same privileges as any other member of that Association, but is no longer required to pay the annual membership fee.

- * Their name shall be recorded annually on the Association's membership list as a Life Member.



THE ONTARIO FEDERATION OF HOME AND SCHOOL ASSOCIATIONS

ASSOCIATION LIFE MEMBERSHIP

NOMINATION FORM

A Home & School Association wishing to honour a **member for outstanding service** to the Association may confer a Life Membership in the Association.

Please complete the following form when nominating one of your members for an *Association Life Membership*. This information is required prior to a Life Membership certificate being processed and mailed to you, along with a pin. The cost is \$100.00.

Please print clearly

NAME OF HOME & SCHOOL
ASSOCIATION: _____

NAME OF NOMINEE: _____

INFORMATION REGARDING THE NOMINEE

1. Positions the nominee has held at your Association:

1. _____
2. _____
3. _____
4. _____
5. _____

2. Reasons why your Association feels the nominee should become a Life Member: *(Attach extra pages as necessary)*

3. Number of years involved with your Association: _____

OTHER REQUIRED INFORMATION

1. The motion to nominate (*name*) _____
for a Life Membership was carried on (*date*) _____
at a (*meeting type*) _____ Meeting
of the (*H&S name*) _____ Home & School Association.

2. Name of nominator _____
Name of seconder _____

3. Where should the Life Membership certificate and pin be mailed?

Name _____
Address _____
City _____ Postal Code _____
Phone # _____

4. When is this Life Membership to be presented?

Date: _____ Type of meeting: _____

Submitted by: _____

Please allow 3 weeks for this Life Membership to be processed.

Mail to:

Ontario Federation of Home & School Associations
51 Stuart Street
Hamilton ON L8L 1B5

Questions? Call 905-308-9563 or e-mail: info@ofhsa.on.ca