



2016 ASSOCIATE MEMBERSHIP APPLICATION

\$99.00

Applicant first Name		Last Name:
Job Title		Employer:
Phone #		
Work Address		
Email Address		
Note: If email provided you are consenting to receive emails from the PAO		

Check one of the following that pertains to you:

I am employed within government, a government agency or by another person or entity and I provide or supervise the provision of prosecution services in relation to offences pursuant to federal or provincial statutes or municipal by-laws

☐

I am employed within government, a government agency or by another person or entity and I provide administrative functions in connection with prosecution services

☐

I am a student (articling student, intern or co-op student) within an office that administers prosecution services

☐

And I have held the above position for at least six (6) consecutive months.

Signature of Applicant: _____

By signing you are agreeing that all of the above information is correct. If there are any changes it is the Applicant's responsibility to notify the Association within one (1) month.

Applications must be received by March 31st of the applicable year. All memberships expire on December 31st of the same year.

Make payment payable to:
Forward Application & Cheque to:

Prosecutors' Association of Ontario
Prosecutors' Association of Ontario
c/o City of Mississauga
Provincial Offences - Prosecutions
950 Burnhamthorpe Rd. West
Mississauga, ON L5C 3B4
Attention: Deb Salvo

Date Received		Received By	
Payment Received			