



RTO/ERO MEMBERSHIP APPLICATION

This form is for membership only. See separate application for insurance.

First name (as it appears on your Provincial Health Card):		Middle name:
Last name (as it appears on your Provincial Health Card):		
Address – Street/Box/R.R.:		
City:	Province:	Postal code:
Home phone:	Mobile phone:	
Email:		
Date of birth: DD MM YYYY	Social Insurance Number (required for OTPP deduction):	
Twitter:	Facebook:	
Exact or expected date of retirement (required): DD MM YYYY		

Select the category that best reflects your status (choose only one). On the date your membership begins, you will be:

- | | |
|--|---|
| <input type="checkbox"/> A retiree receiving a pension from a teachers' pension plan in Canada, within the next 12 months. If so, are you receiving a pension from the Ontario Teachers' Pension Plan (OTPP)? <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> A retiree from an educational organization in Canada, including the early years, school boards, post-secondary, and the public service. |
| <input type="checkbox"/> A retiree from a First Nations school in Ontario, with teaching qualification from an accredited Canadian University or College, or certification from the Ontario College of Teachers. | <input type="checkbox"/> A spouse of a member including a surviving spouse, separated/divorced spouse, or dependent of the member where there is no surviving spouse. (This only applies if you do not fit into one of the other categories listed.) |
| <input type="checkbox"/> A retiree from a private school not receiving a pension from OTPP. | <input type="checkbox"/> An individual actively employed in education who is not retiring within the next 12 months and will be eligible upon retirement to join RTO/ERO. |
| <input type="checkbox"/> A retiree who opted for a commuted value transfer or a deferred pension from OTPP following the OTPP rules in place at the time. | |

My spouse/partner is an RTO/ERO member YES NO

If YES, please provide membership #

If YES, would you prefer one mailing to your household? YES NO

I would prefer to receive publications in: ENGLISH FRENCH

I would prefer the Provincial magazine, *Renaissance* in (please choose one only):

ELECTRONIC FORMAT **OR** HARD COPY MAILINGS

I am/was a member of:

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> ADFO | <input type="checkbox"/> ETFO |
| <input type="checkbox"/> AECEO | <input type="checkbox"/> OCSOA |
| <input type="checkbox"/> AEFO | <input type="checkbox"/> OECTA |
| <input type="checkbox"/> CAAT | <input type="checkbox"/> OPC |
| <input type="checkbox"/> CAUT | <input type="checkbox"/> OPSEU |
| <input type="checkbox"/> CPCO | <input type="checkbox"/> OPSOA |
| <input type="checkbox"/> CUPE | <input type="checkbox"/> OSSTF |
| | <input type="checkbox"/> Other |

How did you hear about RTO/ERO (please check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Attended an RTO/ERO Retirement Planning Workshop | <input type="checkbox"/> OMERS or OTPP | <input type="checkbox"/> <i>Professionally Speaking</i> |
| <input type="checkbox"/> A retired colleague | <input type="checkbox"/> ECE Link | <input type="checkbox"/> <i>Register</i> |
| <input type="checkbox"/> Conference (please specify) <input type="text"/> | <input type="checkbox"/> <i>Education Today</i> | <input type="checkbox"/> <i>Revue Connexion Direction</i> |
| | <input type="checkbox"/> Facebook | <input type="checkbox"/> <i>Twitter</i> |
| | <input type="checkbox"/> Google | <input type="checkbox"/> <i>University Affairs</i> |
| <input type="checkbox"/> RTO/ERO's magazine, <i>Renaissance</i> | <input type="checkbox"/> <i>Leaders & Learners</i> | <input type="checkbox"/> <i>University Manager</i> |
| <input type="checkbox"/> My Affiliate/Association | <input type="checkbox"/> Online advertising | <input type="checkbox"/> <i>Voice</i> |
| <input type="checkbox"/> My Employer | <input type="checkbox"/> <i>Plant Manager</i> | <input type="checkbox"/> Other (please specify) <input type="text"/> |
| | <input type="checkbox"/> <i>Principal Connections</i> | |

**Check ONLY ONE of the following RTO/ERO Districts to which you wish to belong.
NOTE: RTO/ERO DISTRICTS ARE BASED ON GEOGRAPHICAL REGIONS AND NOT ON SCHOOL BOARD DISTRICTS.**

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Algoma | <input type="checkbox"/> Hastings & Prince Edward | <input type="checkbox"/> Peterborough | <input type="checkbox"/> Thunder Bay |
| <input type="checkbox"/> Brant | <input type="checkbox"/> Huron, Perth | <input type="checkbox"/> Prescott-Russell | Toronto |
| <input type="checkbox"/> Bruce, Grey, Dufferin | <input type="checkbox"/> Kenora | <input type="checkbox"/> Rainy River & Atikokan | <input type="checkbox"/> City of Toronto |
| <input type="checkbox"/> Bruce, Grey | <input type="checkbox"/> Lambton | <input type="checkbox"/> Rainy River | <input type="checkbox"/> Etobicoke and York |
| <input type="checkbox"/> Dufferin | <input type="checkbox"/> Lanark | <input type="checkbox"/> Atikokan | <input type="checkbox"/> North York |
| <input type="checkbox"/> Chatham-Kent | <input type="checkbox"/> Leeds and Grenville | <input type="checkbox"/> Région du ciel bleu | <input type="checkbox"/> Scarborough & East York |
| <input type="checkbox"/> Cochrane & Temiskaming | <input type="checkbox"/> London-Middlesex | Renfrew | <input type="checkbox"/> Waterloo |
| <input type="checkbox"/> Dryden & Red Lake | <input type="checkbox"/> Muskoka | <input type="checkbox"/> Renfrew North | <input type="checkbox"/> Wellington |
| <input type="checkbox"/> Dryden | <input type="checkbox"/> Niagara | <input type="checkbox"/> Renfrew South | <input type="checkbox"/> Windsor-Essex |
| <input type="checkbox"/> Red Lake | <input type="checkbox"/> Nipissing | Simcoe | <input type="checkbox"/> York Region |
| <input type="checkbox"/> Durham Region | <input type="checkbox"/> Norfolk | <input type="checkbox"/> Barrie, Central Simcoe | British Columbia |
| <input type="checkbox"/> Elgin | <input type="checkbox"/> Northumberland | <input type="checkbox"/> Orillia, North Simcoe | Mainland British Columbia |
| <input type="checkbox"/> EstaRiO | <input type="checkbox"/> Ottawa-Carleton | <input type="checkbox"/> Alliston, South Simcoe | <input type="checkbox"/> BC Mainland/Sunshine Coast |
| <input type="checkbox"/> Frontenac, Lennox & Addington | <input type="checkbox"/> Oxford | <input type="checkbox"/> Collingwood, West Simcoe | <input type="checkbox"/> BC Interior |
| <input type="checkbox"/> Haliburton & Kawartha Lakes | Parry Sound | <input type="checkbox"/> Stormont, Dundas, Glengarry | Vancouver Island |
| <input type="checkbox"/> Haliburton | <input type="checkbox"/> Parry Sound East | Sudbury/Manitoulin | <input type="checkbox"/> Victoria |
| <input type="checkbox"/> Kawartha Lakes | <input type="checkbox"/> Parry Sound West | <input type="checkbox"/> Sudbury | <input type="checkbox"/> Mid/Upper Island |
| <input type="checkbox"/> Halton | <input type="checkbox"/> Peel | <input type="checkbox"/> Manitoulin/North Shore | <input type="checkbox"/> I do not wish to belong to a District. |
| <input type="checkbox"/> Hamilton-Wentworth & Haldimand | | | |

Please tell us about yourself

RTO/ERO is committed to fostering a fair and inclusive membership organization which values diversity and equity. We encourage respect for the dignity of all members, consistent with the principles outlined in human rights and equity legislation. We are dedicated to removing barriers and embracing diversity in the development and provision of our programs and services to members.

Your responses are **voluntary and confidential**. Please share some brief information about yourself to assist us in providing better service to all members and in fostering an engaging, participatory, and inclusive culture. We value and appreciate your sharing of this information with us. Thank you.

<p>Gender</p> <p>Select the one option with which you most identify:</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Transgender female</p> <p><input type="checkbox"/> Transgender male</p> <p><input type="checkbox"/> Not listed</p> <p><input type="checkbox"/> Prefer not to say</p>	<p>Marital status</p> <p>Select the one option with which you most identify:</p> <p><input type="checkbox"/> Married/Partnered</p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Separated/Divorced</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Not listed</p> <p><input type="checkbox"/> Prefer not to say</p>	<p>Ethnicity</p> <p>Select all the options with which you most identify:</p> <p><input type="checkbox"/> Indigenous/Aboriginal</p> <p><input type="checkbox"/> African-Canadian/Black</p> <p><input type="checkbox"/> Middle Eastern/Arab</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Latin American</p> <p><input type="checkbox"/> Caucasian</p> <p><input type="checkbox"/> Oceanic</p> <p><input type="checkbox"/> Not listed</p> <p><input type="checkbox"/> Prefer not to say</p>
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Group Insurance Program

I have submitted my separate application for the RTO/ERO Group Insurance Program:

Enclosed Online – Date applied

I am not applying for insurance at this time.

- I hereby apply for membership in RTO/ERO.
- I consent to the collection, use and disclosure of any personal information required to administer my membership in RTO/ERO.
- I hereby certify that I have completed this application so that all statements made herein are true and correct in all respects and may be relied upon by RTO/ERO without further inquiry.
- Commencing in the second year of my membership, I direct OTPP to deduct my membership fees from my pension each January and remit the fees to RTO/ERO; **this applies only to those receiving a pension from OTPP.**
- I expressly consent to the receipt of electronic messages from RTO/ERO as a form of communication, effective upon RTO/ERO's acceptance of my membership application.

Signature: _____ Date:

Payment Information

**Completion of this page is required
to process your application for RTO/ERO membership.**

NAME OF APPLICANT

Annual Membership Fees

- Members in receipt of a pension from the Ontario Teachers' Pension Plan (OTPP) pay \$1.25 per every \$1,000 of gross pension received.
- All other members, except for those actively employed, pay the average fee paid by those receiving a pension from OTPP. Currently that amount is \$57.00 per year.
- Those who are actively employed pay \$32.00 per year.
- In the first year of membership, all fees are pro-rated, dependent on the month in which you join (see table below).
- Your first year's membership fee is payable to RTO/ERO by credit card.
- We need to receive your initial payment based on your membership start date (see table below for fee details), before we can process your applications.

Circle only one fee for the month your membership starts.

	MEMBERSHIP START DATE											
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Fee for Retired Members	\$57	\$53	\$49	\$45	\$41	\$37	\$33	\$29	\$25	\$21	\$17	\$13
Fee for Actively Employed Members	\$32	\$29	\$26	\$23	\$20	\$17	\$14	\$11	\$8	\$8	\$8	\$8

Credit Card Information

VISA MasterCard

Name of cardholder:

Card number:

Expiry date: |

MM

YYYY

Security code:

THE CARD SECURITY CODE IS USUALLY LOCATED ON THE BACK OF YOUR CREDIT CARD AND IS TYPICALLY A SEPARATE GROUP OF 3 DIGITS TO THE RIGHT OF THE SIGNATURE STRIP.

Signature:

Date: |

DD

MM

YYYY

**Please use the enclosed pre-paid envelope to send us your application(s),
or scan and send to membership@rto-ero.org, or fax to 416-962-1061.**

RTO/ERO Membership FAQs

Q What is the difference between my membership fees in my first and my second years?

- A**
- Your initial membership fee is a **non-refundable** amount paid by a new member upon confirmation of RTO/ERO membership eligibility. The amount charged depends on the month in which your membership starts (**see table on the previous page**).
 - Your membership fee is paid annually, starting from the first calendar year after you first join. Members who receive an Ontario Teachers' Pension Plan (OTPP) pension pay \$1.25 per \$1,000 of their gross OTPP pension. For all other membership categories, **see table on the previous page**.

Q How do I pay for my membership?

- A**
- If you are a member or a surviving spouse collecting an Ontario Teachers' Pension, your full-year membership fee will be deducted directly from your January pension.
 - All other members will be invoiced.

Q When should I submit my application?

- A**
- We encourage people to join in the years leading up to retirement. Joining at least a few months prior to retirement will ensure a smooth transition. At a minimum, you should join at least 4-6 weeks prior to your membership start date.

Q Do I have to be an RTO/ERO member if I want to participate in RTO/ERO group insurance plans?

- A**
- **Yes.** Your RTO/ERO membership must be in good standing to participate in RTO/ERO group insurance plans.

Q Can I apply for membership and insurance at the same time?

- A**
- **Yes,** as long as your membership start date is on or before the start of your insurance coverage.



300 – 18 Spadina Road, Toronto ON M5R 2S7
416-962-9463 (Toronto area) • 1-800-361-9888 (Toll free)

Fax 416-962-1061

www.rto-ero.org | info@rto-ero.org

Twitter: @rto_ero

Facebook: www.facebook.com/rto.ero