



Mood Disorders Ottawa Mutual Support Group (MDO)

www.mooddisordersottawa.ca

c/o Canadian Mental Health Association
301 - 1355 Bank Street
Ottawa, ON K1H 8K7

Voice Mail: (613) 526-5406
Fax: (613) 737-7644 (Attention: MDO)
Email: mdosupport@hotmail.com

Membership Application [CONFIDENTIAL when COMPLETE]

Date: _____ New Member Renewal

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____

Email: _____

Add my email to MDO's confidential electronic distribution list Yes No

Type of Membership (Annual)

Regular Income Individual = \$10
 Regular Income Family = \$17

Low Income Individual = \$3

Low Income Family = \$5

I would like to donate \$ _____

Tax receipts issued for donations of \$10 or more - check box

Do you have a mood disorder (kept confidential)* Yes No

(*Members with mood disorders are eligible for subsidized participation in MDO's Discovery 2000 Recreation Program.)

Waiver and Release

On behalf of myself, my relatives and guests, I, the undersigned, hereby waive, release and forever discharge Mood Disorders Ottawa (MDO) Mutual Support Group, its Directors, Officers, agents, volunteers and employees, and anyone associated with MDO, of and from all manner of actions, causes, suits, debts, claims and demands whatsoever in connection with MDO and Discovery 2000.

I assume full responsibility for any injury, accident, damage or harm arising as a result of my participation, and that of my relatives and guests, in all MDO and Discovery 2000 events, activities, programs and services including travel involved in participation.

I am over the age of eighteen (18), legally competent to sign this waiver, and agree that the terms herein are contractual. I have read this waiver before voluntarily signing it.

Signature of Participant

Date (DD/MM/YY)

Bring this form to one of our meetings with your fee payment (cash or cheque payable to MDO), or mail completed form (with cheques only) to our address above.

Sept 12



Mood Disorders Ottawa Mutual Support Group (MDO)

www.mooddisordersottawa.ca

c/o Canadian Mental Health Association
301 - 1355 Bank Street
Ottawa, ON K1H 8K7

Voice Mail: (613) 526-5406
Fax: (613) 737-7644 (Attention: MDO)
Email: mdosupport@hotmail.com

Volunteer Application

MDO always welcomes grassroots volunteers for a wide range of activities. Volunteering with MDO is a fun way to make friends and make a difference in your life and the lives of others. We provide coaching and mentoring, if needed, and opportunities to develop new skills and share your experience and knowledge. The minimum of requirements are kindness, respectfulness, honesty, integrity, generosity of spirit, teamwork, compassion, and understanding of people living with mood disorders and the mental health and recovery community.

Please circle any volunteer activities that interest you:

1. Facilitating Discovery 2000 social and recreational events: researching, planning, booking, organizing, registering participants, etc.
2. Administration: filing, copying, mail management; coordinating bulk mail-outs; managing MDO info-line.
3. Advocacy: representing MDO on local and provincial committees and reporting to our Board.
4. Facilitating a central Family Support Group.
5. Contributors and researchers/writers for monthly newsletter.
6. Radio personality/broadcaster.
7. Fundraising.
8. Outreach.
9. Special events and projects.
10. Monthly information meeting: organization, set-up, registration, greeting and clean-up.
11. Phoning members each month about events.
12. Board members.
13. Subcommittee participants: Finance, funding, outreach, policy and procedures, constitutional amendments.

Please tell us about your skills, interests, experience, education and talents:

Bring this form to one of our meetings or mail to our address above.