



International Society for
Augmentative and Alternative Communication

Dear Current or Prospective ISAAC-Canada Member:

It is **MEMBERSHIP RENEWAL** time again, now for 2025! You can renew your membership in ISAAC-Canada directly from the Members Only page of the ISAAC International website at: <https://www.isaac-online.org/english/about-isaac/members/membership/isaac-canada/>. You will need your individual ISAAC member ID and web password, along with a valid credit card (VISA or MasterCard only).

Alternatively, you can return the completed forms with your payment (**in Canadian funds only**) to ISAAC International at 312 Dolomite Drive, Suite 216, Toronto, ON M3J 2N2, Canada. If you prefer to pay by credit card (**VISA or MasterCard only**), please enter the credit card details on page two of the Membership Renewal form.

CONTINUING FOR 2025: BONUS FOR CORPORATE AND INSTITUTIONAL MEMBERS

ISAAC International is offering all 2025 corporate and institutional members with a "No Additional Cost" subscription to ISAAC's scientific journal, AAC.

Check out the details at:

<https://www.isaac-online.org/english/about-isaac/members/membership/>

ISAAC CORPORATE MEMBERSHIP BENEFITS FOR 2025

ISAAC International is offering all 2025 corporate members with additional opportunities for conducting targeted marketing and promotion with our key stakeholders.

Check out the details at:

<https://www.isaac-online.org/english/about-isaac/members/corporate-members/>

IMPORTANT NOTES:

Your ID# (Identification Number) is issued when you first join ISAAC, and is unique to each membership. Please use your ID# for:

- Registering for ISAAC conferences
- Enquiring about your membership and/or subscription(s)
- Ordering ISAAC products

If you do not know, or have misplaced, your ISAAC Identification Number, please send an email to carol@isaac-online.org.

Every now and then ISAAC needs to contact you about new projects, events or to ask for your opinion. **Please make sure we have your current mailing address and email address. Email changes to: carol@isaac-online.org. Thank you!**



International Society for
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Membership brings you many benefits. As an ISAAC-Canada member you will receive:

- Quarterly issues of the **ISAAC Communicator (formerly E-News)**. The **ISAAC Communicator** gives you updates on what is happening in the AAC field worldwide.
- Annual **ISAAC Membership Directory**.
- “**No Additional Cost**” subscription for the **AAC Journal** for our 2025 Corporate and Institutional members.
- Substantially reduced rates for the **AAC Journal** (ISAAC’s peer-reviewed scientific journal). Your subscription to the **AAC Journal** gives you full access to the online version of the Journal including archive copies. *****SPECIAL PROFESSIONAL COMBINED MEMBERSHIP AND AAC JOURNAL RATE*****
- Substantially reduced rates when ordering **ISAAC products**.
- Access to a global network of AAC professionals, researchers, manufacturers, people who use AAC, and family members.
- Full access to the **ISAAC website**, including the Members Only section, which provides resources, information and links to interactive communication opportunities for ISAAC members.

You can also subscribe to ISAAC’s two affiliated publications at preferred member rates.

- AGOSCI In Focus (formerly AGOSCI News), published biannually - July and December in English, in Australia.
- Communication Matters, published 3 times per year – April, August, and November, in English, in the UK.

Your support of ISAAC-Canada, and participation in related activities, enables us to enhance and to develop augmentative and alternative communication around the globe. If you have any questions or have any suggestions about our programs, please contact the ISAAC International office by phone (905-850-6848), by fax (905-850-6852) or by e-mail to franklin@isaac-online.org. I am looking forward to your continued support of ISAAC-Canada and ISAAC International in 2025.

Sincerely,

Franklin Smith, MBA, CMC
Executive Director, ISAAC International

P.S. ISAAC needs your help to carry on with projects that will spread the word about AAC and promote the best possible communication for people with complex communication needs worldwide. By making a donation to one of the following programs you can help someone become an ISAAC member or you can sponsor someone to attend future ISAAC conferences.

ISAAC Sponsored Membership Program:

\$30.00 CAD provides membership **for a person who uses AAC**. Many people who use AAC live on limited incomes but are keenly interested in advocacy and issues relating to AAC. Allow a person who uses AAC to participate more fully in the development of policies, advocacy, and issues regarding AAC. For more information, visit the ISAAC website at: <https://www.isaac-online.org/english/about-isaac/how-you-can-help/make-a-donation/>

Travel Fund:

Support an ISAAC member who uses AAC or an ISAAC member from an emerging country to attend ISAAC conferences.

To make a contribution, simply add your donation to your membership renewal form and include it in the same cheque. Please be as generous as you can. Thank you!



Name:

Address:

City:

State/Province:

Postal Code:

Country: Canada

Home Phone:

Work Phone:

Fax:

Email:

Website:

Competency in Language(s) Other than English: _____

A. Type of Membership (includes membership in ISAAC)

Membership fees are tax deductible.

- Professional [] \$ 88. CAD
Professional PLUS AAC Journal - over 20% saving [/] \$ 170. CAD
People who use AAC & their families [] \$ 30. CAD
Student (Full-time) *see following page [] \$ 40. CAD
Institutional ** see following page [] \$ 400. CAD
Corporate [] \$ 1,960. CAD
Retired Members***see following page [] \$ 62. CAD

Enter A: \$ _____

B. Official Journal: Augmentative and Alternative Communication (AAC) 4 issues/year

- Special rate for Corporate & Institutional Members [] Included with membership at no additional cost
Special rate for all ISAAC members [] \$ 108. CAD
Special rate for PWU AAC/Student/Retired [] \$ 65. CAD

Includes online access and no additional charge for AIRMAIL delivery

Enter B: \$ _____

C. Affiliated Publication: AGOSCI In Focus (formerly AGOSCI News)

Published in English biannually in Australia - June and December

- Special ISAAC rate [] \$55. CAD

Enter C: \$ _____

D. Affiliated Publication: Communication Matters

Published in English in the UK three times per year April, August, and November.

- Special ISAAC rate [] \$67. CAD

Enter D: \$ _____

E. Affiliated Publication: ISAAC Israel Journal

Published, annually in the spring, in Hebrew with English abstracts.

FREE ACCESS

Donations: "I wish to make a contribution to support":

- F1. Anne Warrick Breaking The Ice Conference Scholarship Enter F1: \$ _____

- F2. Travel fund [] \$25. [] \$50. [] \$100. [] Other \$ _____ Enter F2: \$ _____
(sponsor an individual to attend ISAAC Conference)

- F3. ISAAC Sponsored Membership Program [] \$30. [] Other \$ _____ Enter F3: \$ _____
(Complete mailing information on a separate sheet)

- F4. Other Donation to: _____ [] \$25. [] \$50. [] \$100. [] Other \$ _____ Enter F4: \$ _____

TOTAL AMOUNT (for items A through F4) Enclosed: \$ _____

Please make CANADIAN DOLLAR cheques or money orders payable to: ISAAC-Canada

We recognize the importance of protecting the privacy of information collected about our members

The ISAAC Membership Directory is published annually. Please indicate if you do not wish your name and information included []

Occasionally we are asked to share our mailing lists so that information of an educational or promotional nature can be sent directly to you from affiliated organizations or corporate sponsors. Check here to opt out of receiving such communication []

[] I am interested in serving ISAAC as a committee member

[] I require a receipt for payment of membership/subscriptions

CREDIT CARD PAYMENT

If you wish to pay by **VISA or MasterCard**, please complete the following information:

Credit Card Number: _____ Expiry Date: _____
 CVV (3 digits on back of card): _____
 Name on Credit Card: _____ Signature: _____
 (please print name of card holder)

*For **Student Membership**, please complete only item #1 **OR** item #2:

[] 1. "I confirm that the above named is a full-time registered student at

_____ (Name of University/Institution)."

_____ (Signature of Professor)

_____ (Date)

[] 2. "I confirm that I am a full-time registered student and have enclosed a copy of my University/Institution registration Confirmation."

** **Institutional membership** is for non-profit groups such as schools, assistive technology centres, service delivery centres and academic programs in related fields.

*** **Retired membership** is for individuals interested in AAC who are no longer in the workforce or actively engaged in a search for work.

2025 ISAAC Membership Directory

Profession/Role

The 2025 ISAAC Membership Directory will be available to all members internationally by July 2025. It is imperative that your membership enrolment be received by **March 31st, 2025** for your name to be included in the Directory.

In order for our Directory to be most effective, please indicate below the category (or categories) that best describe(s) your profession or association/role in the field of augmentative and alternative communication. You may use the codes below to record your choices on the front of this membership form. **Please do not use more than three (3) categories, and use either a "tick" (✓) or "X".**

CATEGORY	CODE
Administrator	ADM
Author	AUT
Consultant	CST
Doctor, Medical	DOC
Caregiver	FCG
Linguist	LIN
Occupational Therapist	OTR
Physical Therapist	PHT
Psychologist	PSY
Research	RES
Social Worker	SWK
Special Educator	SED
Student	STU
Other Profession not listed	

CATEGORY	CODE
Augmentative Communication Specialist	ACS
Computer Scientist	COM
Counsellor	COU
Engineer	ENG
Geneticist	GEN
Manufacturer	MAN
Person who use AAC or family member(s)	AAC
Professor	PRO
Rehabilitation Specialist	RSP
Retired	RET
Special Education School	SCH
Speech/Language Pathologist/Therapist	SLP
Vendor	VEN



ISAAC SPONSORED MEMBERSHIP FORM
For period January 1st – December 31st, 2025
to sponsor a person who uses AAC

Name: _____

Address: _____

City: _____ **State/Province:** _____ **Postal Code:** _____

Home Phone: _____ **Work Phone:** _____ **Fax:** _____

Email: _____ **Website:** _____

Sponsored Member Information -- Please complete all sections:

Name: _____

ISAAC Member ID# _____(if applicable)

Profession Role: _____

Mailing Address: [] Business [] Home

Street & No. _____(City) _____(State/Province) _____

Country _____(Postal Code) _____

Telephone: Business: (_____) _____ Home: (_____) _____

Fax: (_____) _____ E-mail: _____

Web site: _____ Competency in languages other than English: _____

Sponsored Member Information -- Please complete all sections:

Name: _____

ISAAC Member ID# _____(if applicable)

Profession Role: _____

Mailing Address: [] Business [] Home

Street & No. _____(City) _____(State/Province) _____

Country _____(Postal Code) _____

Telephone: Business: (_____) _____ Home: (_____) _____

Fax: (_____) _____ E-mail: _____

Web site: _____ Competency in languages other than English: _____