

WASHINGTON STATE DEAF-BLIND CITIZENS, INC. MEMBERSHIP FORM

Anyone can join WSDBC. You will receive invitations to all community recreational and social events, and general meetings.

ACTIVE MEMBERSHIPS are for Deaf-Blind individuals residing in Washington State. Active Members can participate in all aspects of WSDBC, from sitting on the Board to participating in various events. WSDBC is a Deaf-Blind run organization and the Active Membership includes the right to vote at General Meetings.

ASSOCIATE MEMBERSHIPS are for sighted Deaf and hearing individuals. Associate membership is also for Deaf-Blind individuals not residing in Washington State. Associates are welcome to participate and volunteer for various social events, and committees. They may also be elected as officers of the WSDBC Board. While Associates are welcome to attend and participate in General Meetings, this does not include the right to vote.

ORGANIZATION MEMBERSHIPS are a great way for various groups to support the goals of WSDBC, which include fostering public awareness of the Deaf-Blind. Organization members are welcome to attend and volunteer for various social events, activities and general meetings. Organization membership does not include the right to vote at General Meetings.

Membership Fees:

- **\$20.00 for Active or Associate Members**
- **\$15.00 for Senior Citizens (55+)**
- **\$30.00 for Organizations**

Please include membership fee. (See above.)

Donation (optional): \$

Thank You!

Name:		
Email:		
Address:		
City:	State:	Zip:
Phone #:	<input type="checkbox"/> VP	<input type="checkbox"/> TTY/TB
	<input type="checkbox"/> SMS Text	<input type="checkbox"/> Voice

Type of Membership (please check one box only): <input type="checkbox"/> Active <input type="checkbox"/> Associate <input type="checkbox"/> Organization
<input type="checkbox"/> I am a senior citizen (age 55 and over)

<input type="checkbox"/> I want to receive announcements.
<input type="checkbox"/> I want to receive general meeting minutes and finance reports.

Please select one:
<input type="checkbox"/> Large Print <input type="checkbox"/> Braille Uncontracted / Grade 1
<input type="checkbox"/> Braille Contracted / Grade 2

Please select one:
<input type="checkbox"/> Receive info by email <input type="checkbox"/> Receive printed info by regular mail
(If possible, we recommend you choose email not regular mail. Help WSDBC reduce expenses and save some trees too.)

**Please mail completed form with your payment to:
Washington State Deaf-Blind Citizens, Inc.
PO Box 2322, Seattle, WA 98111-2322**

For office use only
<input type="checkbox"/> New member <input type="checkbox"/> Renewal membership <input type="checkbox"/> Senior citizens
Date rec'd: <input type="checkbox"/> Check # <input type="checkbox"/> Cash