

You are an important piece!

Become a Member of Arc Today



Why Become a Member of Arc of Onondaga?

Membership may only be a small fee, but it plays an important role for Arc and people with developmental disabilities. For less than the cost of a few cups of coffee, you can help strengthen Arc's voice when it comes to lobbying the government on behalf of people with developmental disabilities.

Benefits of membership include a free subscription to *Patterns* magazine, reciprocal memberships in both NYSARC and The Arc of the United States, voting rights at the annual meeting, and more. Arc is a family organization and a membership organization; membership is about caring, information sharing, and advocacy.

Giving the Gift of Membership to family and friends is even more important to expanding awareness and building support for people with developmental disabilities. When you give the gift of membership, the fees are *reduced*! This year, we're embarking on a **Me+3 campaign**. When you register for your membership, don't forget your spouse, children over 18, family members, neighbors, and friends. If each of you brought in three new members to the Arc family, our influence and voice would grow exponentially! Feel free to make copies of this membership application, or request more from Arc.

Lifetime Membership is also a convenient way to ensure you always stay part of the Arc family. Never worry about missing a renewal, sending in a check each year, or wondering if you're a current member. Sign up once, and enjoy the benefits of Arc membership for a lifetime.

Join Today!



Membership Form

Please print clearly

Your Membership Information

Mr. Mrs. Ms. Dr. Rev. Hon.

Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Telephone: _____

Email: _____

- Lifetime Membership - \$50
- 10 Year Membership - \$25
- 1 Year Membership - \$10

Signature: _____
**required*

Payment

- I've enclosed a check to: **Arc of Onondaga**
- Visa Master Card American Express

Card # _____

Expiration Date: _____

- Please check here if you are a family member of a person with developmental disabilities

Simply detach this form, fold in half, and return with the enclosed envelope! Call, email, stop by or write us for additional membership forms to recruit additional members!

Fold here to return

Additional Member (Your Spouse? Family Member? Friend?)

Mr. Mrs. Ms. Dr. Rev. Hon.

Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Telephone: _____

Email: _____

- Lifetime Membership - \$25
- 10 Year Membership - \$15
- 1 Year Membership - \$5



Signature: _____
**required*

Additional Member (Another Friend? Neighbor? Family Member?)

Mr. Mrs. Ms. Dr. Rev. Hon.

Name: _____

Address: _____

City: _____ State: ____ Zip: _____

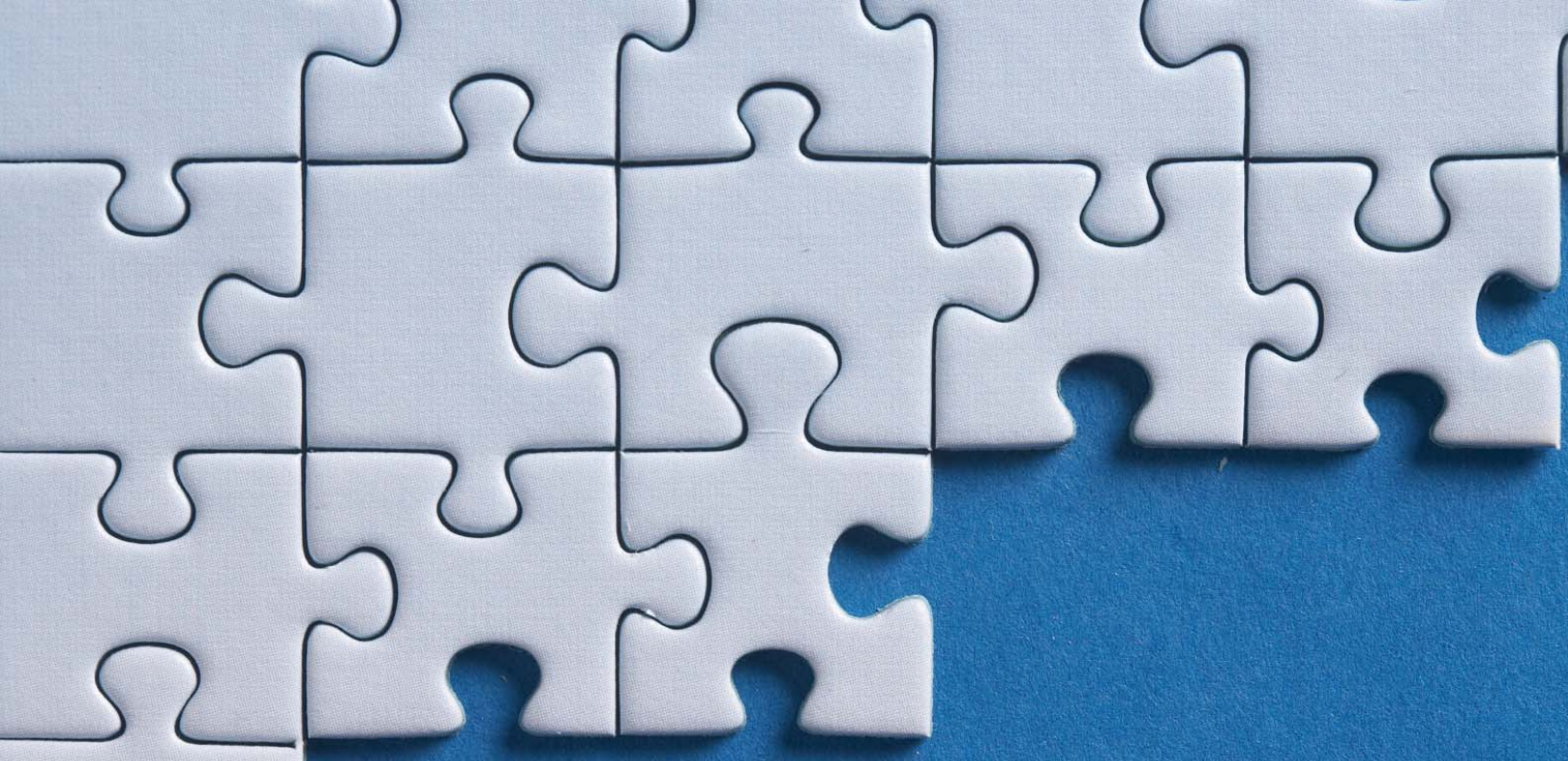
Telephone: _____

Email: _____

- Lifetime Membership - \$25
- 10 Year Membership - \$15
- 1 Year Membership - \$5



Signature: _____
**required*



Be a part of Arc's mission.

Give memberships to family & friends.