



Miami Valley Down Syndrome Association

Membership Information Form 2009-2010

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-Mail:** _____

Annual membership dues are now \$25 per family or \$15 individual. Note: Members must be 18 years old or older to vote or hold office. Return completed form by renewal date of July 31 (if possible), along with your check or money order made payable to MVDSA to:

Miami Valley Down Syndrome Association
 Attn: Member Information
 1133 S. Edwin C. Moses Blvd., Suite 190
 Dayton, OH 45417

Amount enclosed \$_____ (additional contributions appreciated)

For Directory purposes, list all additional family members living with you. Birthday info is optional, but please indicate birthday for member with Down syndrome so that we might send a card on their birthday.

Name	Member Type**	Birthday	Adult (check box)
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

To better serve you, please fill out all that apply:

I want to be included in the MVDSA Member directory. Yes No

I give the MVDSA permission for my child's picture to be used in MVDSA publications for promotional purposes: with name attached without name attached No Thank You

I prefer my newsletter to be sent by e-mail **only**. E-mail address: _____ *

I would you like to receive email updates about upcoming events/reminders? Yes No

I would like to receive the automatic phone call messages with upcoming events. Yes No

** To help us serve you better, please identify each person listed based on the following member types:

- Parent = Parent of individual with Down syndrome
- DS = Individual with Down syndrome
- Sibling = Brother or sister of individual with Down syndrome
- Other Relative = Relative of individual with Down syndrome other than parent or sibling
- Special Needs = Individual has special needs, but not Down syndrome
- patron = Individual interested in the development and well-being of persons with Down syndrome

Membership Dues are needed by July 31st, 2009