

# Membership Enrollment Form

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Would you like to be included in our Membership Directory?  Yes  No

**Types of membership** Please check one and make check payable to The Arc of the Piedmont. Your membership dues includes membership in The Arc of Virginia and The Arc of the United States.

- Individual (\$25/year)     Family (\$45/year)  
 Sponsor (\$100/year)     Lifetime (\$1,000)

## Volunteer

Is there a certain talent or service you would be willing to contribute to The Arc? We rely heavily on contributions and volunteers in order to provide services to infants, children and adults with developmental disabilities. If so, please list it below or contact us at (434) 977-4002 and let us know how you would like to help.

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Thank you for your support!

**I am:** (check all that apply)

- a new member  
 a renewing member  
 a person with or at risk of disability  
 a parent/relative of a person with or at risk of disability  
 a field related professional  
 a friend or community member

## Mail to:

The Arc of the Piedmont  
509 Park Street  
Charlottesville, VA 22902

(434)977-4002 (800)732-9507

e-mail: [mail@thearcofthepiedmont.org](mailto:mail@thearcofthepiedmont.org)

<http://www.thearcofthepiedmont.org>