



The Arc of Island & Skagit
1500 E. College Way, Ste A, PMB 374
Mount Vernon, WA 98273

T 304 584-3272
www.arcislandskagit.org
arcofislandskagit@gmail.com

Achieve with us.

Become a member of The Arc of Island & Skagit

A donation of \$15 or more entitles you to a one year membership with
The Arc of Island & Skagit.

Your membership helps us fulfill our mission every day & provides benefits to
yourself & others:

- You are joining a network of families, self-advocates and professionals providing support, experience, information and encouragement to one another. You are also becoming part of the largest grass roots movement to protect the rights of people with intellectual and developmental disabilities and their families.
- You become a member at the local level: The Arc of Island & Skagit; at the State level: The Arc of Washington State; and at the National level: The Arc of the United States.
- Numbers matter! You are adding your voice so that our National & State officials know that The Arc members and constituents will be heard.
- Members receive The Arc of Island & Skagit's monthly e-newsletter, as well as information about trainings, meetings and special events, where you will meet and learn from other families and professionals.
- **PERSONAL Membership Benefits:**
 - ◇ **Intensive Consultation Services-- may require an appointment.**
Creative problem solving
Long-term planning, including pre-guardianship counseling services
Support in the development of goals and independence
 - ◇ **Forms assistance**
DDD, SSI/SSDI, public benefits, service programs, housing, etc.
 - ◇ **Advocacy Support Services with Public & Private Providers**
School, government, community, etc.
 - ◇ **Discounted or Free Group Training; Discounted or Free Community Events**



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<p>Please indicate your area (s) of interest:</p> <p><input type="checkbox"/> Parent/Family Coalition</p> <p><input type="checkbox"/> Legislative Information & Advocacy</p> <p><input type="checkbox"/> Parent to Parent/Family Connections</p> <p><input type="checkbox"/> Sibshops & Sibling Support</p> <p><input type="checkbox"/> Self-Advocacy</p> <p><input type="checkbox"/> Independent Living/Housing</p> <p><input type="checkbox"/> Other: _____</p>	<p>I would like to be contacted regarding:</p> <p><input type="checkbox"/> Fundraising</p> <p><input type="checkbox"/> Volunteer Opportunities</p> <p><input type="checkbox"/> Board Membership</p> <p><input type="checkbox"/> Other: _____</p>
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Name: _____		<input type="checkbox"/> New Member	<input type="checkbox"/> Renewal
Address: _____			
City, State, Zip: _____			
Phone: _____ Date: _____			
Email: _____			
		Membership Type:	
<input type="checkbox"/> Self-Advocate (Individual w/disability)		<input type="checkbox"/> \$5 Self-Advocate	
<input type="checkbox"/> Family member to someone w/disability		<input type="checkbox"/> \$15 Individual/Family	
My family member is ____ years old		<input type="checkbox"/> \$ ____ Additional Donation	
<input type="checkbox"/> Professional		Total Enclosed: \$ _____	
<input type="checkbox"/> Concerned Citizen		Please make check payable to: The Arc of Island & Skagit <i>(Please do not send us cash.)</i>	
<input type="checkbox"/> I'd like to sponsor someone with a disability!		<input type="checkbox"/> I'd like to volunteer! See above areas of interest.	