

## **NAMI Missouri Membership Application**

☐ Renewal ☐ New Member

Thank you for joining or renewing your commitment to NAMI Missouri and those we serve.

In addition to receiving state and national NAMI newsletters via mail, members will also receive informational emails about NAMI and related news and activities, including educational and support programs, medications/treatment, community services and advocacy opportunities. You may opt out of our email list at any time.

Name:		Date:
Address:		
City:	State:	Zip: _
Phone:	Email:	
Annual membership dues		
\$ 60.00 □ Household		
\$ 40.00 □ Individual		
\$ 5.00 $\square$ Open Door (limited income)		
Dues \$		
Donation \$		
Total \$		
Please send form and payment to:		
NAMI Missouri 3405 West Truman Blvd. #102 Jefferson City, MO 65109		
For credit card payments:		
Name on Card		
Visa / Discover/ MasterCard #		Exp. Date/
Billing Address:		
Signature:		
573-634-7727   <u>info</u>	@namimissouri.org   ww	w.namimissouri.org