



# MEMBERSHIP MATTERS!

*We have done so much - together, we can do even more.*

**Together, we are stronger advocates for a more just and equitable world for people with intellectual and developmental disabilities (I/DD) and their families.** Become an AHRC NYC member today and add your voice to those who share in your commitment to people with I/DD.

Joining is easy - complete this form electronically and email it to AHRC NYC's Membership Team - [membership@ahrcnyc.org](mailto:membership@ahrcnyc.org). You can also print it and mail using the address below or join online by visiting [AHRCnyc.org](http://AHRCnyc.org), and click on "Get Involved." **If you are already a member pass this along and invite family and friends to join!**

**MEMBERSHIP LEVELS** Check the box for the membership level you wish to subscribe to.

**YES! I WANT TO BE AN ANNUAL MEMBER**

**\$10.00 Annually**

- Voting Rights (applies to non staff members, 18 & over)
- Invitations to AHRC NYC events
- AHRC NYC publications

**YES! MY FAMILY AND I WOULD LIKE TO BE MEMBERS**

**\$50.00 Every Three Years** Checking the box implies you have the explicit consent of your family members that reside with you who are 18 and over to join.

- All of the benefits of a Three Year Membership **PLUS**
- Dell discounts on computers and electronics

Please list your family members' information below.

Full name  
Full name  
Full name  
Full name  
Full name

**YES! I WANT TO BE A THREE YEAR MEMBER**

**\$25.00 Every Three Years**

- All of the benefits of Annual Membership **PLUS**
- AMC Movie Ticket Discount (\$11.00 ea., sold in pairs)
- Plum Benefit discounts for travel, sports, entertainment, car rentals, groceries, and more

**YES! I WANT TO BE A LIFETIME MEMBER**

**\$200.00 One Time Payment for TWO MEMBERS** Checking the box implies you have the explicit consent of your family member that resides with you who is 18 and over to join.

- All of the benefits of a Three Year Membership **PLUS**
- Membership in "The Buyer's Edge" program, a consumer discount buying service

Please list your family member's information below:

Email  
Email  
Email  
Email  
Email

**PAYMENT INFORMATION**

Full name as it appears on card

Phone

Email

Street address:

City

State

Zip

Enclosed is my check for \$ payable to AHRC New York City OR please charge my credit card:

Visa MasterCard Amex Discover Card number

Expiration

CVV

**AHRC NYC - Membership Team • 83 Maiden Lane New York, NY 10038 • 212-780-2748**



Raymond Ferrigno, Board President  
Marco Damiani, Chief Executive Officer  
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