



# Disability Action Center

## Membership Application



MEMBER NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Community/Social Member	Active Member	All-Inclusive Member
<ul style="list-style-type: none"> <li>✓ Best option for community members and supporters who attend programs <b>1-2 days per month.</b></li> <li>✓ Receive mailings, calendar of events, and newsletter</li> <li>✓ Covers an individual not household.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Best option for clients and families who attend programs <b>1 day per week.</b></li> <li>✓ Receive mailings, calendar of events, and newsletter</li> <li>✓ Covers an individual not household.</li> <li>✓ Free Access to Fitness Room</li> <li>✓ Discounted Camp-Can Do Week (\$10/day vs. \$20/day)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Best option for clients and families who attend programs <b>2 or more days per week.</b></li> <li>✓ Receive mailings, calendar of events, and newsletter</li> <li>✓ Covers an individual not household.</li> <li>✓ Free Access to Fitness Room</li> <li>✓ Discounted Camp-Can Do Week (\$10/day vs. \$20/day)</li> </ul>

I want to be a Community/Social Member for \$50 a year

I want to be an Active Member for \$100 a year

I want to be an All-Inclusive Member for \$150 a year

I would like to make an additional contribution to my membership fee \$ \_\_\_\_\_

I would like to make an addition contribution \$ \_\_\_\_\_ in memory of \_\_\_\_\_

I would like to make an additional contribution to the #Higherground Building Fund \$ \_\_\_\_\_

I understand that the membership fees do not eliminate the additional payments charged a Friday Night Out, Camp Can-Do, and DAC Bowling but the discount applies if applicable as listed above.

I understand that Experience It Co-Op and Full STEM Ahead fees may apply.

Please make checks payable to and send them to:  
The Disability Action Center  
448 Leonard Ave. Fairmont, WV 26554

For more information: (304) 366-3213  
www.disabilityactioncenter.com  
jsole@disabilityactioncenter.com

**#HigherGround #HigherPurpose**