



Down Syndrome Association of Brazos Valley

Membership Form for 2010

Name _____

Address _____

Phone # _____

E-mail _____

Name of Person with Down syndrome

Gender of that person _____

His/her date of birth _____

Your relation to the person with DS _____

How much does it cost?

For an individual or family membership, the annual dues are \$30.00 _____

To be a FRIEND OF DSABV, the annual level of giving is \$100.00 _____

Business name on website

To be a PARTNER OF DSABV, the annual level of giving is \$200.00 _____

Business logo on website

I would like to purchase the 2010 DSABV calendar(s) \$10 each _____ how many?
(Please add \$2.00 for postage per calendar)

DSABV holds several events where pictures are taken. It is possible your child or family will be in the photographs. We are asking your permission to possibly use the photo in local publicity releases, newspaper articles, websites, television and/or video, our newsletter and our brochure. If you do, or do not, want your child's picture or name to be used, indicate your desire below. Authorization to use event photos?
No ___ Yes ___ If yes: Initial Here: _____

Return to:

Down Syndrome Association of Brazos Valley
2910 Horseback Ct.
College Station TX 77845