



Membership/Renewal Application

Membership Types: Please Check one.

- INDIVIDUAL(Voting Member)/FAMILY MEMBERSHIP**
\$35.00 annual fee
- PROFESSIONAL MEMBERSHIP**
\$35.00 annual fee
- OPEN DOOR MEMBERSHIP**
\$3.00 individuals and families on limited income
- I want to make a tax deductible donation to NAMI CHESAPEAKE**

NAME: _____

ORGANIZATION: _____

ADDRESS: _____

CITY: _____

STATE: _____ **ZIP CODE:** _____

PHONE: _____ **EMAIL:** _____

Optional Information:

I AM A: **CONSUMER** **FAMILY MEMBER** **FRIEND**
 MENTAL HEALTH PROFESSIONAL **OTHER**

PLEASE RETURN YOUR APPLICATION TO:
NAMI CHESAPEAKE
P.O. BOX 15545
CHESAPEAKE, VA 23328

Membership is for one (1) calendar year.

*NAMI Chesapeake is a non-profit, 501(c)(3) charitable organization.
Donations to NAMI Chesapeake are tax-deductible.*