

Membership Application

Yes, I Want to Become an IDA Member

Check type of membership desired and circle length of membership desired:

Dues: Effective 2008

One Year Rates

Two Year Rates

- | | | |
|--|----------|----------|
| <input type="checkbox"/> AGENCY (for up to 3 staff) | \$200.00 | \$325.00 |
| <input type="checkbox"/> INDIVIDUAL | \$60.00 | \$100.00 |
| <input type="checkbox"/> PARENT (parent of a child with special needs) | \$25.00 | \$35.00 |
| <input type="checkbox"/> STUDENT (one year option only) | \$25.00 | N/A |
| <input type="checkbox"/> ADDITIONAL DONATION OF \$ _____ | | |

Payment: Check Purchase Order# _____ VISA Mastercard

Exp.Date _____ Account # _____

Billing Address _____ Zip code _____

Signature _____

The membership begins the date the payment of the membership fee is received. Membership includes three newsletters annually, local chapter meetings, annual statewide membership meeting, networking, and advocacy opportunities. As a member, you are entitled to discounted registration fees to attend all IDA state trainings and conferences. **DISCOUNTS** average \$75 less than non-members for each training/conference. Agency members can send up to 3 staff members to trainings/conference and **SAVE BIG** with discounts equal to \$225 to \$450 on average. Membership more than pays for itself after registering for just one IDA state training or conference!

*By submitting this application, I give my permission to have IDA send correspondence and announcements to me using my fax number: YES NO , email address: YES NO
IDA may share my address with related organizations: YES NO*

Name _____

Professional Discipline _____

Address (Home OR Agency) _____

City

State

Zip

Agency Name _____

Home Phone () _____ Business Phone () _____ FAX () _____

Email _____

- | | | |
|---|--------------------------|---|
| Preferred Chapter Association | <input type="checkbox"/> | Northern Chapter |
| <i>For details about chapter regions, go to our web site at www.idaofcal.org and click on Chapters.</i> | <input type="checkbox"/> | River Valley Chapter (Sierra Mountains/Sacramento & Central Valley Regions) |
| | <input type="checkbox"/> | San Diego/Imperial County Chapter Chapter |
| | <input type="checkbox"/> | Southern Chapter |

Signature _____

IDA is a nonprofit organization. Donations are tax deductible to the extent allowed by law.

WEB(2/08)

**All checks should be payable to the Infant Development Association of California
Mail application to PO Box 189550, Sacramento, CA 95818-9550**