



Membership Form – Please Print Neatly

New Member
 Renewal
 Family Membership: \$10.00

Parent(s) Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Child's Name: _____ Birthdate: (/ /)

Please feel free to list siblings & ages:

Additional Donation: _____ Total Enclosed (Membership - \$10.00 & Donation): _____

Participation is vital to the success of any organization. Please let us know your area(s) of interest:

<input type="checkbox"/> Board Member - current opening - Secretary (1)	<input type="checkbox"/> Board Member - current opening - Self Advocate (2)
<input type="checkbox"/> Committee Chair	<input type="checkbox"/> Buddy Walk and Run & Fun Day Committee
<input type="checkbox"/> Community Outreach Committee	<input type="checkbox"/> Fundraising Committee
<input type="checkbox"/> Marketing / Media Committee	<input type="checkbox"/> Membership Committee
<input type="checkbox"/> Self Advocate Committee	<input type="checkbox"/> Social Committee
<input type="checkbox"/> Other Committee:	<input type="checkbox"/> Other Committee:
<input type="checkbox"/> Annual Birthday Party	<input type="checkbox"/> Annual Giving Tuesday Drive
<input type="checkbox"/> Coffee Social	<input type="checkbox"/> Community Outreach (Education/WDSO/Healthcare)
<input type="checkbox"/> Baby, Toddler, or Pre-school Playgroup (circle choice)	<input type="checkbox"/> Elem, Middle School Peer Group Event (circle choice)
<input type="checkbox"/> High School, Adult Peer Group Event (circle choice)	<input type="checkbox"/> Marketing / Media
<input type="checkbox"/> Parent's Night Out (or Mom's Night Out)	<input type="checkbox"/> Sibling Support Group Event
<input type="checkbox"/> Other Topic:	<input type="checkbox"/> Other Topic:

Please complete this form and enclose it with your check made payable to CCDSIG, Inc. by **April 30, 2018**: CCDSIG, Inc., PO Box 258, Exton, PA 1934.

Waiver for photo release:

_____ I agree to having images of my family members available for release to the CCDSIG to media, social media sites, newspapers and print materials. This is solely for the purpose of promoting CCDSIG.

_____ I do not want to have images of my family members available for release to the CCDSIG to media, social media sites, newspapers and print materials.