

# Northwest Indiana Adult Guardianship Services, Inc. 2012-2013 MEMBERSHIP APPLICATION

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

CONTACT PERSON NAME/TITLE \_\_\_\_\_

E-MAIL \_\_\_\_\_

CONTACT PERSON NAME/TITLE \_\_\_\_\_

E-MAIL \_\_\_\_\_

## Membership Opportunities

*Please check below*

### Voting Member Opportunities

- Individual \$65 per year
- Family \$85 per year
- Nonprofit Organization/Agency \$250 per year
- Corporation/Business \$250 - \$500 per year (you may contribute up to \$500)

### Non-Voting Member Opportunities

- Community Supporter \$50 per year
- Nonprofit /Corporation/Business \$100 per year
- Advocate \$25 per year
- Limited-Income Member \$15 per year
- Student/Older Adult 60+ \$15 per year

## Service Opportunities

*Please check below*

- I would like to host a community meeting.
- I would like information about being a **Volunteer Guardian**.
- I would like information regarding opportunities to serve on a committee.

Please mail completed application with check payable to:  
Northwest Indiana Adult Guardianship Services, Inc.  
2650 West 35<sup>th</sup> Avenue  
Gary, IN 46408  
(219)985-6566

