

MEMBERSHIP FORM

When you join NAMI Durham you become a member of NAMI North Carolina and NAMI National for a full year. You will receive newsletters from each.

Check one:

☐ **Regular Membership** \$ 40.00

☐ **Household Membership** \$ 60.00

For more than one family members from the same household

OR

☐ **Open door membership** \$ 5.00

For those with limited income

Donation \$ _____

Total enclosed \$ _____

Checks payable to: NAMI Durham

Name _____

Address _____

City _____

State _____ Zip _____

Cell Phone _____

Home Phone _____

Work Phone _____

Email _____

I am a:

Family Member _____ Individual with a Mental Illness _____

Professional _____ Other _____

Please send your check and this form to:

NAMI Durham

PO Box 967

Durham, NC 27702