

<p>Join NAMI Ozaukee</p> <p><i>When you join now, you become a member of your NAMI Affiliate, your NAMI State Organization and the national NAMI organization.</i></p>	<p>Contributions</p> <p>NAMI Ozaukee needs your support. Your gift will help continue the support and education services for everyone affected by mental illness</p>	<p>Mail to:</p> <p style="text-align: center;">NAMI Ozaukee PO Box 335 Mequon, WI 53092</p> <p style="text-align: center;">(Or—Pay online at the website: www.nami.org)</p>		
<p>Yes, I want to: (please check one)</p> <p><input type="checkbox"/> <u>join</u> NAMI</p> <p><input type="checkbox"/> <u>renew</u> membership for one year</p> <p>Dues</p> <p>_____ \$35 Regular Membership</p> <p>_____ \$3 Open Door (for low income)</p> <p>Member benefits include NAMI's flagship magazine, the <i>Advocate</i>, as well as NAMI's monthly e-newsletter, <i>NAMI Now</i>, if you subscribe at: www.nami.org/subscribe. All members receive the same benefits. NAMI membership is valid for one year.</p>	<p>\$ 25 <input type="checkbox"/></p> <p>\$ 50 <input type="checkbox"/></p> <p>\$ 75 <input type="checkbox"/></p> <p>\$ 100 <input type="checkbox"/></p> <p>\$ 125 <input type="checkbox"/></p> <p>\$ 200 <input type="checkbox"/></p> <p>\$ _____</p> <p>NAMI Ozaukee is a tax exempt, non-profit organization. Donations are tax deductible to the extent allowed by law.</p>	<p>Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.</p>		
		<p>Primary Member Last Name:</p>		
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<p>Payment Information</p>		<p>Check <input type="checkbox"/></p>	<p>or</p>	<p>Cash Enclosed <input type="checkbox"/></p>
<p>For Office use only:</p>		<p>Check</p>	<p>Cash</p>	<p>Date:</p>