

**The Arc of Prince George's County Membership Application**

Individual- \$20; Family- \$35; Contributing- \$40; Organization- \$50

Please circle: Parent/Relative, Self-advocate, Professional in field, Interested citizen

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**If you are a parent/relative, what is the age of your family member with a disability?**

\_\_\_\_\_

**Occupation, skills, and hobbies:** \_\_\_\_\_

\_\_\_\_\_

**Are you interested in being on a committee or volunteering in a program?**

\_\_\_\_\_

*Please make checks payable to The Arc of Prince George's County.  
Mail this application and membership fees to:  
1401 McCormick Drive, Largo, MD 20774.*

