

NAMI SOUTH BAY MEMBERSHIP APPLICATION

Please check your membership type:

\_\_\_\_\_ \*Household: \$60.00 (multiple people at one address).

\_\_\_\_\_ Individual: \$40.00

\_\_\_\_\_ Open door: \$5.00 (open to anyone who is experiencing financial constraints)

Donation Amount (optional) \_\_\_\_\_

Total Enclosed \_\_\_\_\_ ;

Make check payable to and mail to NAMI South Bay, P.O. Box 5295, Torrance, CA 90510

\*If there are multiple people at your address who wish to join NAMI, choose any of the following membership options: 1. A Household Membership, which covers all people at the address, or 2. An Individual or Open Door Membership for each person at the address, or 3. An Individual membership for one person at the address.

Name: \_\_\_\_\_ Phone (home): \_\_\_\_\_

Street: \_\_\_\_\_ Phone (other): \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Additional names for Household Membership or multiple Individual/Open Door memberships:

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

The following information is optional and confidential. It will be forwarded to the NAMI National offices for statistical purposes only: Ethnic Group: \_\_\_\_\_

Relationship of ill person: \_\_\_\_\_ Diagnosis: \_\_\_\_\_

**We are always in need of volunteers.** A list of volunteer opportunities can be found on [namisouthbay.com](http://namisouthbay.com). To volunteer please call the NAMI office (310) 533-0705 or send an email to Paul Stansbury [PStans5@aol.com](mailto:PStans5@aol.com), or talk to a board member at one of the meetings.