



National Black Deaf Advocates

Associate Member: \$15.00 (2009-2010)

Name: _____

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City: _____ State: _____ Zip code: _____

Phone: _____ TTY Voice Video Phone: _____

As a member, you will receive:

- quarterly newsletters
- discounts to conferences
- special invitations to sponsored workshops
- discounts on NBDA merchandise

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Make check or money order payable to: National Black Deaf Advocates, Inc.

Mail to: Martina Moore-Reid, NBDA Treasurer
6774 Cobble Creek Road, Apt. 2C
Whitsett, NC 27377

If you have any questions, please feel free to contact me –
VP – (336) 223-8342
Martinamoore62@yahoo.com

Thank you for joining us...

Receive date: _____

Check#: _____

Cash: _____