



National Black Deaf Advocates, Inc. – Individual Membership Form  
www.nbda.org

## Member-at-Large \$25.00

Please check one:  New Member  Renew Member  
(2010-2011)

Name Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code \_\_\_\_\_

Phone: \_\_\_\_\_  TTY  Voice  Video Phone

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

As a member, you will receive:

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

---

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

Mail to: NBDA  
C/o Sharon White, Secretary  
P.O. Box 32  
Frankfort, KY 40602

If you have any questions, please feel free to contact me  
[secretary@nbda.org](mailto:secretary@nbda.org) or [secretarynbda@gmail.com](mailto:secretarynbda@gmail.com)

## Thank you for joining NBDA