

## Membership/Donation Form

Yes, I would like to become a member of the Autism Society of Alabama. Membership entitles you to the quarterly newsletter, notice of upcoming events and access to the lending library. Join today and help those living with autism.

I would like to make a donation for:

- \$15 Student
- \$30 Individual
- \$40 Family
- \$100 Professional
- \$500 Agency
- \$1,500 Life

I would like to renew my membership to the

Autism Society of Alabama.....\$ \_\_\_\_\_

I would like to make an additional donation.....\$ \_\_\_\_\_

Total Amount.....\$ \_\_\_\_\_

Name (s): \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

### Payment information:

Check/Cash  Visa  Mastercard  American Express

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Expiration \_\_\_\_\_

Signature \_\_\_\_\_

*Please mail or fax to:*  
Autism Society of Alabama  
4778 Overton Road  
Birmingham, AL 35210  
Phone:205-951-1364  
Fax:205-951-1366