

Connecticut Association of the Deaf - Membership Form (January 1 – December 31)

Date _____

Includes CAD Newsletters, Discounts for CAD Conference & Other Events

New

Renewal

Permanent Address Change

Individual Membership Dues

Active Member
\$20.00/Yr (Single)

Active Member
\$35.00/Yr (Couple)

Student
\$15.00/Yr

Senior Citizen
\$15.00/Yr (Age: 60)

Affiliate Member
\$50.00/Yr

Contribution \$ _____

Name _____

Address _____

City _____ **State** _____ **Zip Code** _____

Phone TTY/VP/Voice _____ **Email** _____

Deaf Hard of Hearing Late Deafened Deaf Blind Hearing

Method of payment: Check Money Order Total enclosed \$ _____

Mail this form to: CAD Treasurer
135 N. Plains Industrial Road
Wallingford, CT 06492