## **USICD MEMBERSHIP FORM**

For Check Payments, please submit this page along with payment in the enclosed remittance envelope or to:

United States International Council on Disabilities 11 Hope Road, Suite 111, #254 Stafford, VA 22554

For Credit Card, Debit or PayPal payments, please click on the "Join USICD" button on the USICD homepage.

	Dat <u>e:</u>
Membership Type:	Organizational (400)
Name of Organization:	Individual (\$50)
First Name (Given Name):	
Last Name (Surname):	
Title:	
Street Address:	
City:	State
Zip Code:	Country
Telephone:	Fax:
Contact Email:	
Website:	
Areas of Interest:	
For more information, please contact:	Isabel Hodge Email: <u>ihodge@usicd.org</u> Phone: (800) 928-4261