



1680 West Sherman Ave.
Vineland, New Jersey 08360
Phone: 856-691-9138 Fax: 856-563-0221
Web Site: arccumberland.org

Membership Application

Name _____ Date: _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone (Home) _____ (Work) _____ (Cell) _____

Do you presently receive services from the Arc of Cumberland County? YES NO

If 'YES', what program(s)/service(s)? _____

Our current membership fees are as follows:

Individual \$20.00
(mailings to 1 individual)

Family \$30.00
(mailings up to 3 family members)

Corporate \$50.00
(mailings up to 6 business associates)

Please make checks payable to "The Arc of Cumberland County"

If this is a Family or Corporate application, please complete the following information on the back of this application for all individuals whom you would like to be on the mailing list to receive our quarterly newsletter and monthly informational materials

(Please attach additional names and addresses on a separate piece of paper as needed)

Name _____ Relation to Primary Member _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone (Home) _____ (Work) _____ (Cell) _____

For people with intellectual and developmental disabilities

Name _____ Relation to Primary Member _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone (Home) _____ (Work) _____ (Cell) _____

Name _____ Relation to Primary Member _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone (Home) _____ (Work) _____ (Cell) _____

How Can We Serve You?

I would like information regarding Arc of Cumberland County Programs and Services

- Supportive Living
- Summer Camp Fisher
- Recreation Programs
- In Home Respite
- Supported Employment
- Special Olympics
- After School Options
- Inclusive Recreation
- Saturday Drop In Program
- Day Program
- Information/Referral

I am interested in statewide and national issues for people with disabilities as follows:

- Medical/Managed Care
- Self-Advocacy
- Residential Waiting List
- Family Support Networks
- Other Information (please specify) _____

Date Received ____/____/____

Added to Database by _____