

FY2025 Membership Application

Your Contact Information:

First Name Last Name

Address

City State Zip Code

Phone Email

Acknowledgements will be emailed. Please print clearly.

Membership:

\$25 Annual Membership (July 1, 2024 - June 30, 2025)

Additional Contribution of \$

Do you or a family member currently receive services from The Arc?

No Yes, Client Name and Arc Program

Please check all that apply:

Self Advocate Relative Professional in the Field Interested Citizen

Are you interested in volunteering?

No Yes

Please join the Executive Leadership team and the Board of Directors for a Member Exclusive Panel Discussion on Thursday, June 27th from 6-7pm at The Arc's Main Office, 393 Mantoloking Road, Brick, NJ.

Yes, I will attend. Yes, I will attend with a guest. No, I am unavailable.

*Please mail checks to: The Arc, Ocean County Chapter
393 Mantoloking Road, Brick, NJ 08723
Attn: 2025 Member Drive*

*To make your membership donation online please visit
www.arcocean.org or scan the QR code.*

