



Northside Atlanta

Membership Application

Complete form and mail in with your payment, or you can join at our website:
www.NAMINorthsideAtlanta.org. Click JOIN/RENEW on left side of main page.

* Name: _____

* Address: _____

* City/State/Zip: _____

County: _____

* E-mail: _____

* Phone: (H) _____ (C) _____

* Information required to properly set up your membership record

All NAMI Northside Atlanta members receive local & national newsletters & are affiliated with NAMI National & NAMI Georgia.

Membership Rates Effective 7/1/17

_____ \$40 Individual Membership

_____ \$60 Household Membership

_____ \$5 Open Door Membership

(contact Beth Sanders at beths@naminorthsideatlanta.org)

_____ Please contact me about ways I can help/volunteer.

Make checks payable and mail to:

NAMI Northside Atlanta

Attn: Membership Dues

P.O. Box 244043

Atlanta, GA 30324

NAMI Northside Atlanta, Inc. is a non-profit organization under
Internal Revenue Code section 501(c)(3)

Donations are Tax Deductible-Federal Tax ID #45-1227396

www.naminorthsideatlanta.org