**Developmental Services of Dickson County **

Membership Form

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Email County

Classification: \_\_\_Self-Advocate ($5) \_\_\_ Parent ($10) \_\_\_ Interested Citizen ($10) \_\_\_Professional ($10)

Would you like to receive a copy of The Connection (The Arc quarterly newsletter): Yes No

Your Age: 1-24 25-34 35-44 45-54 55-65 66+

Additional Family Member – Membership Information

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second Family Member Name Address (if different)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Email County

Classification: \_\_\_Self-Advocate ($5) \_\_\_ Parent ($5) \_\_\_ Interested Citizen ($5) \_\_\_Professional ($5)

Your Age: 1-24 25-34 35-44 45-54 55-65 66+

For additional information, please contact Robyn Lampley, 615-446-3111, ext. 3008 or [rlampley@dsdc.org](mailto:rlampley@dsdc.org)

Please make checks payable to Developmental Services of Dickson County and mail to:

DSDC / The Arc PO Box 628 Dickson TN 37056