



National Alliance on Mental Illness

NAMI Northern Virginia

I want to help NAMI Northern Virginia make a difference in the lives of individuals living with a mental health condition and family members, throughout our local Northern Virginia communities, by supporting education and support programs and advocacy.

MAKE A DONATION:

- \$25 Friend
- \$70 Professional
- \$100 Sustaining Supporter
- \$250 Program Champion
- \$500 Capacity Builder
- \$1000 Benefactor
- \$_____ Other Contribution
- In-kind

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Email Address: _____ Phone: _____

JOIN OR RENEW MEMBERSHIP:

Not a member yet but would like to join our grassroots organization?

- \$40 Regular
- \$60 Family Membership
- \$5 Open Door

DONATION + MEMBERSHIP TOTAL: \$ _____

PAYMENT OPTIONS:

Credit card: (Address required if you choose to pay by credit card)

Please charge my credit card in the amount of \$ _____

Credit card number: _____ Exp. Date: ____/____/____

CVS 3-digit code: _____ Email address **(required)**: _____

Phone **(required)**: _____

Online: Join, renew or donate online at www.NAMI-NorthernVirginia.org

By check: Make your check payable to "NAMI Northern Virginia" and mail, along with this form, to:

NAMI Northern Virginia, PO Box 8693, Reston, VA 20195

If you have any questions please contact us, info@nami-nova.org or (571) 458-7310

NAMI Northern Virginia is a 501(c)(3) tax-exempt organization.