



Membership Application | FY 2022

July 1, 2021 to June 30, 2022

Name:		
Address:		
City	State	Zip Code
Phone:	_	
Home	Work	Cell
Email:		
By sharing your email address, we	will sign you up for our monthly	e-newsletter.
Do you/family member currentl	ly receive services from The A	rc, Ocean County Chapter?
Yes No	Name:	
Membership Type 🔲 Ar	nnual \$25.00	hip + T-Shirt \$50.00 Size:
Ad	dditional Contribution of \$_	
Please make checks paye 815 Cedar Bridge A T-Shirt curbside pick-up will be	able to The Arc, Ocean Count Avenue, Lakewood, NJ 08701 e at this location. For shipping, v	y Chapter and return to: Attn: Membership. isit our online spirit wear store.
Are you and/or family me	mber a:	
Self Advocate Par	ent/Relative Sibling	
Professional in Developmen	tal Disabilities field	Interested Citizen
RSVP for Membership M Zoom Thursday, June 1	eeting on 7th at 6:00PM P	es No

Thank You for supporting The Arc through membership!

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Achieve with us.