



Membership Form

YES, I/We want to become a member of the Howard County Autism Society. My membership entitles my family and me to attend all social events sponsored by the organization, and receive *Perspectives*, its quarterly newsletter.

- \$25 (annual membership)
- I would like to make a \$_____ donation in addition to my membership fee.

Name _____

Address _____

City/St/Zip _____

Phone _____ Email _____

About your child (optional): Name, age, school and anything else you would like to share with us:

Enclosed is a check payable to the Howard County Autism Society.

Please bill my Visa/MasterCard:

Amount \$ _____

Acct _____

Exp date _____ 3 digit security code _____

Signature _____

Please return this form with payment to:

Howard County Autism Society
9770 Patuxent Woods Drive, Suite 308, Columbia, MD 21046

The Howard County Autism Society acknowledges donors in its newsletter. If you would prefer your donation remain private, please check here.

The Howard County Autism Society (HCAS) relies on the service of volunteers to deliver many of its programs and services. If you would like to get involved as a volunteer, please check which activities you would like to support and we will contact you when a need arises. Thank you in advance.

- The HCAS Annual Walk/5K Run -- Fall 2017
- The HCAS Annual Gala Committee – Spring 2017
- I would like to serve on a committee of the Board of Directors:
 - Advocacy & Partnerships Committee Asperger's Committee Biomedical Committee
 - Program Committee Public Relations Committee Transition and Adulthood Committee
 - Housing Sub-Committee

providing support • promoting awareness • advocating for change

9770 Patuxent Woods Drive, Suite 308, Columbia, MD 21046
410-290-3466 • www.howard-autism.org • info@howard-autism.org