

Membership Information

Membership in PANC is required to attend all Conference and Resource Fairs.

ARE YOU A MEMBER?

If not, sign up today to take advantage of exclusive member benefits!

MEMBERSHIP INFORMATION

I am a Member: (check one)

- Supporting
- Associate
- Sustaining
- Contributor
- Benefactor
- Patron

(COMPLETE REVERSE)

I am NOT a Member: I Want to Join! (check one)

- Supporting
- Associate
- Sustaining
- Contributor
- Benefactor
- Patron

(COMPLETE BELOW & REVERSE)

MEMBERSHIP OPTIONS

2011

1 - Choose a membership level:

Supporting - Associate - Sustaining - Contributor - Benefactor - Patron

A limited number of scholarships are available. Please inquire.

2 - Determine current month:

Jan - Feb - Mar - Apr - May - June - July - Aug - Sept - Oct - Nov - Dec

3 - Determine pro-rated membership amount for this year (2011)

See "Pro-Rated Donation Section"

4 - Enter pro-rated amount here \$ _____

5 - I'd like to prepay next year's membership \$ _____

6 - I'd like to make an additional donation \$ _____

TOTAL AMOUNT INCLUDED \$ _____

(You will enter this amount on the back of this page)

USE THIS CHART TO DETERMINE THE PRORATED MEMBERSHIP DUES:

2010 PRO-RATED MEMBERSHIP DONATION (NEW MEMBERS ONLY)

	SUPPORTING	ASSOCIATE	SUSTAINING	CONTRIBUTOR	BENEFACTOR	PATRON
Annual (Renewals)	\$36	\$48	\$148	\$300	\$756	\$1500
January 1 to March 31	\$36	\$48	\$148	\$300	\$756	\$1500
April 1 to June 30	\$27	\$36	\$111	\$225	\$567	\$1125
July 1 to September 30	\$18	\$24	\$74	\$150	\$378	\$750
October 1 to December 31	\$9	\$12	\$37	\$75	\$189	\$375

PANC
 900 Fulton Ave. Ste.100-5
 Sacramento, CA , 95825-4516
 916-489-0226
 FAX 916-489-0241
 1-866-979-PANC
www.parkinsonsacramento.org

Resource Fair Registration Form

Participant Information Required (please print):

Name(s): _____

Address: _____

City, State, ZIP _____

Phone: _____

E-mail: _____

Payment Information Required (please print):

Payment Type: Cash Check VISA/MASTERCARD

If Visa/MasterCard: _____

Name: _____

Card Number: _____

Exp Date: _____ CCID# _____

Signature: _____

Mail (or FAX) completed registration form with payment to: **900 Fulton Ave.
 Ste. 100-5 Sacramento, CA 95825-4516 or fax to 916-489-0241.**

WHICH RESOURCE FAIRS WOULD YOU LIKE TO ATTEND?

Feb. 26 2011 Fresno	Apr. 9 2011 SF	June 4 2011 San Jose
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
July 30 2011 Sac	Fall 2011 Reno	Winter 2012 San Rafael
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Check each date above you wish to sign up for, then

ENTER THE TOTAL NUMBER IN THIS COLUMN

Registration	Qty.		Amt. Per Event Per Person		# Events	Total (QTY x AMT x #)
Supporting Member	_____ x		\$15/\$20 @ door	x	_____	= \$ _____
Additional Adult Family Members	_____ x		\$15/\$20 @ door	x	_____	= \$ _____
Associate*	_____ x		\$15/\$20 @ door	x	_____	= \$ _____
Sustaining, Contributor, Benefactor or Patron Member (unlimited conference registrations)						= \$ FREE
*This member level benefits include no cost for up to 2 people, 1 event per year, pre-registration required, \$30 maximum						
*Less up to \$30 (\$15 per person) for qualifying members						= (- \$ _____)
PANC Membership (Total amount from reverse side)						= \$ _____
TOTAL AMOUNT						\$ _____