



Mano a Mano Membership Form

PERSONAL INFORMATION/ORGANIZATIONAL INFORMATION

Today's Date	First names(s) and Last name(s)		
Postal Address			
City	State	Zip code	Country
E-mail	Fax		
Principal phone			
In the future Mano a Mano may publish a membership directory. Please indicate if any of the following personal data is to be kept confidential.			
Confidential	___Postal Address	___Email	___Telephone
			___Fax

Statistical data (VOLUNTARY INFORMATION)

Profession (Mark all that apply)	Mark ONE that applies	Languages*
<input type="checkbox"/> Interpreter	<input type="checkbox"/> Hearing	A = Native user or near native fluency B = Fluent, but not native C = Conversational skill level
<input type="checkbox"/> Instructor	<input type="checkbox"/> Hard of hearing	English A B C
<input type="checkbox"/> Student	<input type="checkbox"/> Deaf	Spanish A B C
<input type="checkbox"/> Other _____	<input type="checkbox"/> Deaf-Blind	ASL A B C
		Other A B C

Race/Pertinent Ethnicity (Please Identify your race or ethnicity for future research purposes - Optional). _____

Highest degree completed	Certificates (specific level or language pair)
<input type="checkbox"/> High school diploma	NIC _____
<input type="checkbox"/> GED (Diploma Equivalent)	RID _____
<input type="checkbox"/> Associates degree (A.S. / A.A. 2 year)	ATA _____
<input type="checkbox"/> Bachelors (B.S./ B.A. 4 Year)	NAJIT _____
<input type="checkbox"/> Masters (M.S. / M.A.)	State _____
<input type="checkbox"/> Doctorate (Ph.D.)	Federal Court _____
	Other(s) _____

MEMBERSHIP DUES

<p>Membership category</p> <p><input type="checkbox"/> Individual.....(US\$25.00) Prorated after June 1 \$20.00</p> <p><input type="checkbox"/> Student.....(US\$15.00) Prorated after June 1 \$10.00*</p> <p><input type="checkbox"/> Organization..... (US\$65.00) Prorated after June 1, \$50.00</p> <p>(For those outside of the United States who need membership fee adjustment due to currency disparity, please contact us via email). membership@manoamano-unidos.org The membership fee covers membership through December 31, 2008</p>	<p>*Students must submit proof of registration (i.e. copy of schedule, transcript, letter from faculty, etc...)</p>
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Please make check or money order payable to **Mano a Mano** include "**Membership Fee**" on the memo line, then mail with this application to:

Mano a Mano, Inc.
 Attn: Membership
 3700 Commerce Blvd. Suite 108
 Kissimmee, FL 34741