



Your support helps NAMI Fond du Lac provide programs and services that improves the lives of people affected by mental illness.

Please make checks payable to:  
**NAMI Fond du Lac**

**Mailing address:**      **21 E. 2<sup>nd</sup> Street, Suite 104**  
   **Fond du Lac, WI 54935**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone # \_\_\_\_\_

**I want to be a member and support the mission of NAMI Fond du Lac.**

Benefits include memberships in our state and national organizations, our Second Street quarterly newsletter, publications from our state and national organizations, educational courses, discounts on NAMI publications, news about our advocacy efforts, and voting eligibility on NAMI elections. Your support will help us provide programs and services that improve the lives of people living with mental illness. Memberships have annual renewal fees.

Please choose one of the following options for membership:

- \$60 Household Membership** (multiple individuals at one address, receiving unlimited online member access and one subscription of Advocate)
- \$40 Regular Membership** (standard membership benefits for one person)
- \$5 Open Door Membership** (for people experiencing financial constraints)

Please accept my \$\_\_\_\_\_ donation in addition to my membership (Donations are tax deductible).

- \$10       \$25       \$50       \$100

**THANK YOU FOR YOUR SUPPORT!**