



MAPS Membership Form

*Membership will be for the current MAPS Fiscal Year:
July 1, 2012 – June 30, 2013*

Membership levels and fees:

Organizational/Business Memberships:

- Extraordinary Partner** - \$500
- Caregiver Partner** - \$250
- Community Partner** - \$150
- Friend of MAPS-** \$50

- Individual Membership** - \$25
- Senior/Student Individual Membership** - \$15

Contact Information: ***Please complete all fields.***

Company/Organization	
Contact Name & Title	
Mailing Address	
City, State & Zipcode	
Telephone/Fax	
E-Mail	

Authorized Signature: _____ **Date:** _____

**Membership subject to MAPS approval.*

Payment options: Pay with VISA or MasterCard online with PayPal at <http://www.maps-inc.org/participate/organizational-membership/>, call (617) 864-7600 or mail **form and payment** to:

MAPS
Organizational Membership
1046 Cambridge St.
Cambridge, MA 02139

Or, email your completed form to Lucinda Morais at ***lmorais@maps-inc.org***. For more information please call MAPS (617) 864-7600, or visit **www.maps-inc.org**.