



# Inland Empire Disabilities Collaborative Membership Application

## Who We Are

The IEDC is a consortium of over 270 members representing disability and senior organizations from the Inland Empire.

Our mission is to promote equal opportunity, universal access, and full participation of people with disabilities in all aspects of life.

## Membership

New Members are always welcome! Please complete this application to join our efforts, stay current on issues, and help influence positive change in the Inland Empire! There is no cost for membership. **Membership status is given to individuals, not organizations.**

## Full Membership

This category is for those who can participate actively in monthly meetings and events.

**Requirements:** Commitment to IEDC's mission. Active participation by primary contact/member or designee.

**Benefits:** Full Membership entitles you to all event discounts/privileges, listing in all event marketing collateral, and all IEDC updates/alerts.

## Associate Membership

This category is for those who cannot actively participate in our meetings but would like to be on our email mailing list.

**Requirements:** Commitment to IEDC's mission.

**Benefits:** Associate Membership entitles you to all IEDC updates/alerts and possible listing in event and press materials, as determined by the IEDC Steering Committee.

**Submit completed application to:** IEDC, P.O. Box 11845, San Bernardino, CA 92423 or email [info@iedisabilitiescollaborative.org](mailto:info@iedisabilitiescollaborative.org)

We accept monetary donations. Please make checks payable to "Rolling Start, Inc.," an IEDC partner that administers our funds. Rolling Start is a 501(c) nonprofit organization (tax ID # 95-3178-138) so your contribution is fully tax deductible.



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## Contact Information

Name/Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Website \_\_\_\_\_

Disclose my contact information to the public.

Disclose my contact information only to IEDC members.

Do not disclose my contact information (your organization's name will be posted on the website)

### Please accept my application for:

Full Membership. I can participate in IEDC meetings and events.

Associate membership. I cannot participate but add me to your email list.

(Reminder: Membership status is given to individuals, not organizations)

In joining the IEDC, I confirm that I support and am committed to the collaborative's mission: "to promote equal opportunity, universal access, and full participation of people with disabilities in all aspects of life in our community."

Signature \_\_\_\_\_