Membership Application & Renewal

American Association on Intellectual and Developmental Disabilities

Mail to: AAIDD 8403 Colesville Road, Suite 900 Silver Spring MD 20910

or contact Gabrielle Herald at gherald@aaidd.org for secure electronic transfer

American Association on Intellectual and Developmental Disabilities

Name		Email ad	ldress	
Street address		Street a	ddress line 2	
City		State		Zip code
Referred by: Phone number		I am a student		
Member Types				
Basic	Basic \$90 Inte		nternational Electronic \$60	
			Outside US and Canada On	
Standard \$150		C		
Premium	m \$250	Corporate Bund Call or email fo		
			Academic Bund Call or email for	le \$1,300 r details

Total Annual Dues from above:

Note: AAIDD membership is limited to **individuals**. *Memberships are not transferable*. Membership dues are paid on an annual basis. Corporate and Academic Bundles provide a mechanism to pay the annual membership dues for a group of individuals at a discount.

Professional Interest Networks

Membership in **each Interest Network is \$10 each** *except* for *Religion & Spirituality* (\$30, receives an additional journal) and *Student and Early Career Professionals* (\$0). Total the fees below.

Student and Early Career Professionals (\$0). Total the fees below.
None
Community Living
Creative Arts Therapies
Communication Disorders
Direct Support Professionals
Education
Families
Gerontology
Health & Wellness
International
Legal Process & Public Policy
Multicultural Concerns
Psychology
Religion & Spirituality (\$30)
Research
Social Work
Sexual/Social Concerns
Student & Early Career Professionals (No cost)
Technology
Total Interest Network dues from above:
Donations (Optional)
Donation to Student Scholarship Fund
Donation to otadont outload only failed
Departies to AAIDD
Donation to AAIDD

Total Amount Due (from all categories above)

Payment Information:						
Visa						
MasterCard						
AmericanExpress Discover						
Check (sent to AAIDD in USD)						
Credit Card Information						
Name on Card						
Card Number						
Expiration Date						
Security Code						
Signature						
Billing Address (if different from above)						
Name	Email address					
Street address	Street address line 2					
City	State	Zip code				
Phone number						

Questions? Contact Gabrielle Herald at 202.387.1968 x 201 or gherald@aaidd.org.