



National Catholic Office for the Deaf

# NCOD Membership Form

For October 1, 2017 to September 30, 2018

**Due October 30, 2017**

**NCOD Mission Statement:** "Spread God's message through the support of Deaf and Hard of Hearing Pastoral Ministry so that we may all be one in Christ"

New Member     Renewal     Vision Only

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_ Diocese: \_\_\_\_\_

Deaf/Hard of Hearing     Deaf-Blind     Hearing

Phone (W): \_\_\_\_\_  VP     Voice     TTY     Voice/TTY

Phone (H): \_\_\_\_\_  VP     Voice     TTY     Voice/TTY

FAX: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Designated Voter (for Family & Executive Members only): \_\_\_\_\_

*Please note: All of the above information is printed in the Membership Directory. NCOD needs your assistance to provide complete and accurate information. Thank you!*

## Annual Membership Fees (USA Rates)

Individual \$70     Pastoral \$70     Family \$100     Student \$10  
 Executive \$250 (Diocese, Agencies, & Organizations)  
 Donation: \_\_\_\_\_ (Tax Deductible)

### Membership Benefits:

Members' Biennial Directory (Students do not receive directory but may purchase at a 10% discount)  
Voting privileges at business meetings and Pastoral Week  
Reduced registration fee at Pastoral Week  
Resources at reduced rates & Consultations  
Subscription to Vision (Quarterly; two issues published on website)  
eNewsletter (must provide an email address above)

### Vision Subscription Only (non-member)

One Year  
 \$20 US     \$30 International  
Two Year  
 \$20 US     \$30 International  
 Please send paper copies of web issues

**Mail Information to:** NCOD Membership 2017-18  
7202 Buchanan Street  
Landover Hills, MD 20784

**Contact Information:**  
Phone: 301-841-8209 VP  
Email: [info@ncod.org](mailto:info@ncod.org)  
Website: [www.ncod.org](http://www.ncod.org)