

Building Awareness and Inclusion in our Community! IDD Council Membership Menu

Your membership with the IDD Council is more than just support. It's a powerful way to help build awareness, foster inclusion, and strengthen opportunities for individuals with intellectual and developmental disabilities across our community.

By joining, you're not only gaining access, you're becoming a partner in creating a more inclusive future. Every privilege is a token of our gratitude and a reminder that your voice matters. As a valued member, you'll enjoy a full year of benefits beginning the month your dues are received.

ANNUAL BENEFITS AND PRIVILEGES TO MEMBERS

\$5000+ (ALL BENEFITS FROM \$2500 LEVEL, PLUS ALL OF THE FOLLOWING):	\$2500+ (ALL BENEFITS FROM \$1000 LEVEL, PLUS CHOOSE 1):	\$1000+ (ALL BENEFITS FROM \$500 LEVEL, PLUS CHOOSE 2):
<ul style="list-style-type: none"> • Logo with link on website, ability to put our logo on their website with prior approval • Keynote speaker at Celebrating YOU Employer Recognition luncheon OR another premier event • Access to the benefits of the individual membership level for all families/employees affiliated with your organization • Guest feature (e.g., ad, article, profile) in an issue of the IDD Council newsletter 	<ul style="list-style-type: none"> • Organization's name on IDD Council website • Tailored 1-hour training for your organization's staff or stakeholders (CEUs may be offered for an additional fee) • Present at a Caregiver Education session • Recognition in all IDD Council publications 	<ul style="list-style-type: none"> • Monthly social media posts (1 image of your choice) • Speaker spot at a monthly membership meeting • Request of a custom topic for a Caregiver Education session; priority selection over non-member and non-custom requests • Recognition in select IDD Council publications
\$500+ (ALL BENEFITS FROM \$250 LEVEL, PLUS CHOOSE 2):	\$250+ (ALL BENEFITS FROM \$25 LEVEL, PLUS CHOOSE 2):	\$25 INDIVIDUAL MEMBER
<ul style="list-style-type: none"> • Banner with logo at all 4 Making Connections Disability Resource Fairs OR at April Cool's Day • Organizational info table at Sensory Santa • Permission to distribute information at events (e.g., in bags, or at the doorway) 	<ul style="list-style-type: none"> • Organizational info table at one* of the following events: April Cool's Day, CapeAbilities Job Fair, a Caregiver Education session, OR a Making Connections event • Choose 1 topic for a monthly Caregiver Education session from a pre-set list of topics. Priority selection over non-member requests <p>* May select two organizational table events as benefit option.</p>	<ul style="list-style-type: none"> • Free training (non-CEU) • Collaboration and networking among agencies, caregivers, and other advocates • Recognition of membership on website and newsletter • Access to members-only portal with a resource directory and video/audio recordings of select presentations

...additional customized benefits available a-la-carte to meet your organization's needs!

*CEUs may be offered for an additional fee at individual events.
Members at all levels will receive a discount on CEUs.*

ANNUAL MEMBERSHIP APPLICATION

www.IDDCouncil.org

Join online at <https://www.iddcouncil.org/memberselection>, submit application to Rita@IDDCouncil.org, or mail application to The IDD Council of Tarrant County, 3136 W. 4th Street, Ft Worth, TX 76107

Primary Member Contact:

Correspondence from the IDD Council will be sent to the following:

Name: _____

Title (if applicable): _____

Email: _____

Cell Phone: _____ Work Phone: _____

Shipping/Mailing Address:

Street Address _____ City _____ State _____ Zip _____

Company Information (if applicable):

Organization Name: _____

Principal Location of Organization:

Street Address _____ City _____ State _____ Zip _____

Company Executive's Name: _____

Company Executive's Title: _____

Social Media to follow: Facebook _____

Twitter _____

Authorized Signature: _____

Date: _____

Membership Type:

☐ New Membership

☐ Renewal

Membership # _____

☐ \$5,000 ☐ \$500

☐ \$2,500 ☐ \$250

☐ \$1,000 ☐ \$25

☐ I would like to make a donation to the IDD Council in the amount of \$_____ In Memory/Honor of: _____

Affiliation to the IDD

Community: (select all that apply)

☐ Organization that provides services to people with IDD

☐ I am a person with a disability/self-advocate

☐ I have a family/friend with a disability

☐ Other: _____

Other disability related organization affiliations:

Payment Method

☐ Check #: _____

☐ Invoice Email Invoice to: _____

☐ Credit Card Number: _____ Expires: _____ Security Code (CVV): _____

Name on Card: _____ Zip Code Associated with Card: _____

☐ PayPal (associated email): _____ ☐ Other: _____

Membership benefits begin on the 1st day of the month dues are received and continue for 12 consecutive months.