

# 2011

## Membership Application

### **Sonoma County Mayors' Committee on Employment of People with Disabilities (SCMCEPD)**

**Membership Dues are \$ 5.00 per year: January 1 through December 31.**

**Make your check payable to SCMCEPD.**

**Mail to: DSLC, 521 Mendocino Ave, Santa Rosa, CA 95401**

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

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

Company/Organization: \_\_\_\_\_

Street or Box #: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website URL: \_\_\_\_\_