**PRISMS, Inc.**
**21800 Town Center Plaza**
**Suite #266A-633**
**Sterling, VA 20164**
Tel: 972.231.0035
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Parents and Researchers Interested in Smith-Magenis Syndrome

**Please complete this Membership Form.** Please print.
☐ **NEW** ☐ **RENEWAL**

LAST NAME: _____

FIRST NAMES (MR., MRS., MS.): _____

ADDRESS: _____

CITY: _____STATE/PROVINCE: _____ZIP: _____

COUNTRY: _____EMAIL: _____

HOME PHONE: _____CELL PHONE: _____

☐ I am willing to have newly diagnosed families contact me (Parent to Parent Program).
☐ I am interested in being a PRISMS volunteer.
☐ I would like to receive the Spectrum Newsletter via email only.

SMS PERSON'S FULL NAME:_____

DATE OF BIRTH (mm/dd/yyyy) :_____ GENDER (M/F): Male

RELATIONSHIP: ☐Parent ☐Relative ☐Professional ☐Grandparent ☐Other

## Annual Membership Contribution Information in U.S. Dollars

- $30 SMS Parent/Caregiver/Relative/Friend
- $35 International SMS Parent. Payment by credit card or international money order/cashier's check obtained at your local bank denominated in U.S. dollars. Payment by check or draft in your local currency. Please contact your bank for the current foreign exchange rate or obtain a rate using www.xe.com/ucc/.
- $50 Physician/Health Professional
- $50 Other Organization (please specify)_____
- If you would like to join PRISMS but cannot afford membership, please make as generous a contribution as you can afford at this time. Enclosed is my contribution of $_____.
- Basic Membership contributions do not cover all PRISMS annual operating costs. Please consider making an additional contribution.

**Payment Information.** Please return this Form with your Membership Contribution to above address.

Membership Contribution: $_____ Enclosed is my ☐Check Check #_____ Date:_____
Additional Contribution: $_____ ☐VISA ☐Mastercard

Card #:_____ Exp: 02/2008

Name on Card (please print):_____

Total $ Signature:_____

*We appreciate your support and participation.*
All PRISMS contributions are tax deductible under 501(c)3 of the IRS Code, to the extent allowable by law.
PRISMS keeps all information confidential and will not share or distribute personal information to anyone else without authorization.