

ICRID Membership Application (Rev. 01/12)

The Indiana Chapter of Registry of Interpreters for the Deaf (ICRID) is a non-profit organization of professional interpreters, consumers, organizations, and interested persons. ICRID is the state chapter of the Registry of Interpreters for the Deaf (RID). Membership benefits include the bi-monthly publication of *INSights*, access to a free videotape loan library, Yahoo listserv notifications, and reduced cost to workshops sponsored by ICRID and RID Region III state and affiliate chapters.

Membership cycle runs from July 1 to June 30.

Name: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work phone: _____

I was referred to ICRID by (new referral): _____

Membership Categories & Dues for ICRID:

_____ \$25.00 individual

_____ \$20.00 student **** MUST** show proof each year

_____ \$15.00 senior citizen (55+ years old) **** MUST** show proof first time qualifying

_____ \$35.00 organization

_____ \$45.00 individual--2 year membership

National RID Member? _____ Yes _____ No

(If Yes:) RID number: _____

(If No:) Please send me RID application form _____

Membership Dues: \$ _____

Donation for the Marvin Marshall Scholarship Fund (optional): \$ _____

(Make check payable to **ICRID**) **TOTAL:** \$ _____

Send dues and address changes to:

Mandy Alexander, Membership Chair

P.O. Box 55005

Indianapolis, IN 46205

As a member of ICRID, I agree to abide by the NAD-RID Code of Professional Conduct in all interpreting/transliterating assignments and will work to further the profession of interpreting.

X _____