

JOIN THE COALITION

The National Coalition for LGBT Health welcomes your interest in membership. Please complete the form, indicating your annual contribution level:

We are dedicated to the concept that our ability to effect change will be determined by our bringing together the rich diversity of the LGBT community at a national level - across gender/gender identity, race/ethnicity, disability, education, income, age and geography. If you or your organization would like to join us in the effort to improve LGBT health and well being.

- \$50 Individuals
- \$250 Organizations (budgets <\$500K)
- \$1,000 Organizations (budgets \$500K <\$2M)
- \$1,500 Organizations (budgets \$2M-\$5M)
- \$3,000 Organizations (budgets \$5M-\$10M)
- \$5,000 Organizations (budgets \$10M-\$15M)
- \$7,000 Organizations/Health Departments (budgets above \$15M)

Name		Title
Organization		
Address		
City, State, Zip		
Telephone		Fax
Email		
Name on Credit Card		
Credit Card Type	Account Number	Expiration Date

Please mail your completed form to:
The National Coalition for LGBT Health
1407 S St. NW
Washington, DC 20009