



National Alliance on Mental Illness

nami

Wyoming

NAMI Wyoming Membership Form

Name/Agency Name _____

Address _____

City: _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Email _____

Membership Level:

Professional/Agency..... .. \$35.00

Open Door.....\$3.00

NAMI Wyoming/NAMI National Membership includes delivery of the NAMI National Quarterly Newsletter, The Advocate, the NAMI Wyoming E-Newsletter, and access to membership site on the national website, www.nami.org.

Please send checks to:
NAMI Wyoming
P.O. Box 1883
Casper, WY 82602

* If dues are a problem, let us know!!!