



Michigan Registry of Interpreters for the Deaf <http://www.mirid.org>

Application for Membership 2010 Please discard any previous year membership applications.

Date: _____

Name/Organization: _____ Phone: v/tty/both _____
 Address: _____ cell: _____
 City/State/Zip: _____ Email: _____
 Are you: Deaf / Hard-of-Hearing / Hearing? _____ Residing County: _____

CERTIFICATION

RID/NAD Certification: _____ Member Number _____
 Michigan BEI Level: I II III Michigan Quality Assurance Level: I II III
 Other: _____ EIPA Level _____

MEMBERSHIP

- ___ \$12 Voting member (must be dual RID/MIRID member for voting privileges)
- ___ \$18 Supporting member (not a current RID member/no voting privileges)
- ___ \$10 Student member (please provide proof of enrollment)
- ___ \$20 Organization (no voting privileges)

Applicant Signature: _____
(By signing above you agree to adhere to the R.I.D. Inc. Code of Professional Conduct)

- ◇ Membership year is from July 1 through June 30.
- ◇ To be a member in good standing please have your dues submitted by May 31.

Help us to serve you better Are you an educational interpreter? ___ Yes ___ No School District: _____
 freelance interpreter? ___ Yes ___ No
 Are you a member of your local chapter? ___ Yes ___ No
 Would you like more information to join your local chapter? ___ Yes ___ No

Make checks payable to **MIRID** and send to Martha Meginley
 MIRID Treasurer
 3295 N. Baldwin
 Alma, MI 48801

A processing fee of \$25.00 will be charged
 for any returned checks (NSF).

Office use only

Paid: Cash _____ Check # _____ Date _____
 RID # verification _____ Member list updated _____