



Illinois Families for Hands & Voices  
 PO BOX 9366  
 Naperville, IL 60567  
 Ph: 877-533-5279

Illinois Hands & Voices Membership Application

Name: Address: City/State Phone Number: Email: Age(s) of Deaf/HH Children:	Parent/Individual:	\$25
	Deaf or Hard of Hearing Adult:	\$25
	Student:	\$25
	Professional:	\$40
	Organization/Agency:	\$50
	Additional Donation:	\$
		* Tax-deductible to the extent allowed by law ** Scholarships available for Parents check here:

Please print and mail your application form to the above address with a check payable to Illinois Hands & Voices!