

Greetings!

This letter serves to introduce you to Blindconnect which is an information, referral, and peer support organization for blind and visually impaired persons in Clark County. There are an estimated 32,000 of us in the County; Blindconnect hopes to touch the lives of most directly or indirectly.

The mission of Blindconnect is *to connect blind people to other blind persons, to available services and resources, and to the community-at-large.* We will provide education to those with and without vision problems, peer support to blind persons, their families, and friends; and advocacy at all levels to increase services and inclusion.

Membership is \$10 per year and entitles you to a quarterly newsletter plus updates of importance to blind persons, quarterly membership/social meetings, and all referral services available through the organization. Your membership fee goes to support this local group which receives no regular funding from any source. We will grow through donations and membership fees.

Your participation as a blind or visually impaired person or as someone interested in eye diseases is a strong statement for independence and cohesiveness in our community. Please join us today – we have a place and a program for you!

**BLINDCONNECT, INC
MEMBERSHIP APPLICATION
2012**

NAME: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL:

_____ **BLIND/LEGALLY BLIND**
_____ **VISUALLYIMPAIRED** _____ **SIGHTED**

EYE DISEASE: _____

I'D LIKE TO VOLUNTEER:
_____ **PEER SUPPORT** _____ **NEWSLETTER**
_____ **TELEPHONES** _____ **MAILING**
_____ **PROGRAM PLAN** **OTHER:** _____
MEMBERSHIP _____

(Mail to Blindconnect at:6375 W. Charleston-
WCL#200 Las Vegas, NV 89146).
