

WSIACA

West Side Inter-Agency Council for the Aging, Inc.

Dear Colleague:

We invite you to renew your membership or become a member of WSIACA today. As the first inter-agency non-profit organization dedicated to improving the lives of older people on the west side, we encourage organizations, agencies, and individuals to join us in our mission to provide information, advocacy and action on issues of concern to the elderly of Manhattan's Upper West Side.

Direct benefits of membership include:

- Opportunity to support an organization that works on your behalf
- Inclusion of all agency staff with agency membership
- Priority listing of your agency in our Directory of Services to the Elderly
New: dues paying members will be noted as "Active Members"
- Monthly general meetings on topics of interest to the elder care community
Paid members are welcome to distribute promotional materials at meetings and to make announcements
- Networking with colleagues/peers from other agencies

Please be sure to attend our meetings on the third Thursday of the month at Jewish Home Lifecare, 120 West 106th St. at 9AM. Membership Committee representatives will be happy to welcome you and answer any questions you may have about membership in WSIACA.

Annual membership fees 2020 calendar year are \$75 for agency membership; \$50 for individuals; \$20 for students.

Please fill out the form below and mail with your check by February 29th, 2020. If you wish to charge your membership dues, visit our website, www.wsiaca.org, and use the PayPal option on our homepage. Please see reverse side for agency invoice form.

Sincerely,

Laura Radensky (chair)
Arleen Stern, Ellen Finey (membership committee)



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Name: _____ Date: _____

Agency: _____

Address: _____ City _____ State _____ Zip _____

Email: _____ Website: _____

Type of membership: Agency (\$75) Payment: Check enclosed

Student (\$20) Individual (\$50) Paid via PayPal

All contributions are tax deductible to the full extent of New York law.

Post Office Box 318 • Cathedral Station • New York, NY 10025-0318

www.wsiaca.org

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AGENCY INVOICE

Date: _____

Agency: _____

Address: _____

Annual membership dues – 2020

\$ 75

Please remit with membership form.

Thank you.

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