



CELEBRATING 25 YEARS

Creating a community for survivors of brain injury

Brain Injury Association of Georgia

Corporate Membership

Platinum
Platinum

Gold
Gold

Silver
Silver

Bronze
Bronze

X-Tra Wish
X-Tra Wish

According to the Center for Disease Control and Prevention there are more cases of brain injuries each year than breast cancer, HIV and spinal cord injuries combined. The cost of traumatic brain injury is more than \$48 billion a year and has become the signature wound of the war on terror. In Georgia alone more than 150,000 citizens have experienced a brain injury severe enough to cause disability.

2007 marks 25 years the Brain Injury Association of Georgia has been the leading provider of brain injury information and a partner for the brain injury community. We are involved in political and social advocacy, local resource referrals and state-based program models for educating the public on brain injury issues and prevention.

To celebrate this milestone we are introducing an opportunity for corporations to become members of the Brain Injury Association of Georgia and receive an extra six months of membership at the same level as a one year plan.

For 25 years, we have been committed to providing resource information, support services and educational opportunities for individuals and families affected by brain injury, in addition to making those needs known to professional care-givers.

Show our children, mothers, fathers, husbands, wives and soldiers that you care by choosing your level of membership.

Platinum

Platinum
\$10,000

\$10,000

Platinum Members will demonstrate your support of the very existence of the Brain Injury Association of Georgia. Membership at this level will allow us to:

- Develop programs to assist returning soldiers who have sustained brain injuries
- Educate and provide information and respite programs directly to caregivers
- Maintain a toll free help line accessible to Georgians needing the latest information about brain injury, resources of service providers, physicians, attorneys, advocates and links to community programs designed to accommodate people with brain injury
- Inaugurate new services and programs identified as an immediate need for survivors, caregivers and service providers of people with brain injury

Gold

Gold
\$5,000

\$5,000

Gold Members show your support in a very significant way by allowing us to:

- Establish quarterly breakfast meetings targeted to bring service providers of the brain injury community together
 - Continue the popular summer camp programs vital to the social development of survivors of brain injury and their caregivers
 - Host Annual State Leadership / Caregivers Conference
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Silver Memberships allow us to:

- Develop the network of Support Groups across the State and take your message directly to them.
- Host Leadership Summits and Mini-Conferences bringing together speakers, providers, caregivers and people with brain injuries, enhancing the value of services in the entire brain injury community
- Implement a Brain Injury Awareness Campaign.



Bronze Memberships allow us to:

- Sponsor “Rally at the Capitol” on Disability Day



X-Tra Wish will allow us to:

- Create a Volunteer Program to explore and expand volunteer opportunities to corporations creating partnerships while providing ownership in the brain injury community
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Corporate Membership Registration

Name of Corporation _____

Mailing address _____

City _____ State _____ Zip _____


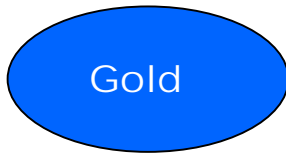



Contact Person _____ Title _____

Phone _____ Fax _____ e-mail _____

Website _____ Tag line (optional) _____

Renewable Membership Level each year during the month you joined with an extra six months, if membership is placed during 2007.

The Tax ID for the Brain Injury Association of Georgia is 58-1497137

				
<input type="checkbox"/> <u>\$10,000</u>	<input type="checkbox"/> <u>\$5,000</u>	<input type="checkbox"/> <u>\$4,000</u>	<input type="checkbox"/> <u>\$2,500</u>	<input type="checkbox"/> <u>\$1,000</u>

Please select your preferred method of payment

Send invoice Bill my credit card. Circle one: AMEX MC VISA

Name on card: _____

Card #: _____ Expiration: _____

Security code (usually 3 or 4 digits) _____ today's date _____

Invoice or charge credit card Once for full amount Quarterly Monthly

Cardholder Signature _____

Print Name _____
