



Organization	
Primary Contact/Voting Member	
Street, City & Zip Code	
Phone	
Email	
Web site	

1. Is the Agency nationally accredited? No Yes; by whom? _____ Renewal Date _____

2. Is the Agency Certified by DBHDD? No Yes; Expiration/Renewal Date: _____

3. Check all services that the agency provides: Residential CAG Prevoc CAI SE CLS
Support Coordination Other _____

4. Provide the following information about your organization: (provide an unduplicated number-if you provide more than one service to an individual, only count the person once.)

➤ Total Number of Individuals Supported in IDD Services: (Waiver, GIA, & VR funding) _____

➤ Total Revenue for IDD Programs/Services (Waiver, GIA, & VR funding): _____

➤ Total Number of Employees providing IDD Services (Full Time Equivalents): _____

5. SPADD membership year is July 1 through June 30. Checks should be made payable to SPADD & mailed with this membership agreement to: SPADD Membership c/o Angela Easter - UCPGA 3300 NE Expressway, Bldg. 9 Atlanta, G.A. 30341

6. Please check the appropriate annual membership dues level:

New Provider less than 2 years in business and with less than \$500,000 in revenue...Annual Dues = \$ 350
Annual Gross Revenue = \$500,000 and under (\$500) Annual Gross Revenue = \$500,001 - \$1,500,000 (\$1,000)
Annual Gross Revenue = \$1,500,001 - \$4,000,000 (\$1,500) Annual Gross Revenue = over \$4,000,001 (\$2, 000)

Supporter Membership (\$250) (Cannot be a service provider) Vendor Membership (\$350)

1 Year Provisional Non-Voting Full Membership (\$350) (May only be used during first year of operation. DBHDD certification or national accreditation will move to full membership status.)

I attest the above information is correct and my signature authorizes SPADD to publicize the organization's membership on the SPADD website and/or printed materials

Print Name

Signature

Date

As a member agency you may add other members of your staff to the SPADD email blast list: Please list below any additional staff names and email addresses you would like to add. Please remember to also notify if any of these should be removed in the future.

