



Adult Day Center Membership, 2007

*WADSA's mission is to increase the quality, availability, accessibility, and cost effectiveness of adult day services in Washington.*

Washington Adult Day  
Services Association

**CENTER INFORMATION (If multiple centers operate, use address for center administration.)**

Name of Organization \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Organization Director/Coordinator \_\_\_\_\_  
Director/Coordinator Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

**ANNUAL BASELINE DATA for RE-NEWING MEMBERS**

Total number of participants served in 2006 \_\_\_\_\_

**CALCULATING WADSA DUES for RE-NEWING MEMBERS**

Provider membership dues are determined by multiplying organization's **total revenue for 2006** by **.0025**.

Total 2006 revenue: \_\_\_\_\_  
Times .0025 \_\_\_\_\_  
**Total amount due for 2007:**     \$     \_\_\_\_\_

**NEW WADSA MEMBERS**

First time WADSA members pay a flat rate of \$300.00 per year (pro-rated)

**PAYMENT OPTIONS**

- Check enclosed for full amount.
- 50% enclosed, the balance to be paid July 1.
- Quarterly payments work best. First installment enclosed. Second, third, and fourth installments due April 1, July 1, and September 1 respectively.
- Please call me to make arrangements that will work for our organization.
- Please send an invoice to our mailing address for the amount due.

**Mail this form and check to WADSA, 85 South Washington, Suite 314 Seattle, WA 98104**

**Phone: 206-461-3899 / 1-888-60-WADSA (outside King County)**

**Fax: 206-461-3218**

**www.adultday.org**

**For information, contact Sara Myers at [smyers@adultday.org](mailto:smyers@adultday.org)**