



Tick-borne Infections Council of North Carolina, Inc
Please join us!

Please join us to help lessen the impact of tick-borne infections in NC and to assist with our registry of persons affected by tick-borne infections.

Date _____

There is no charge to become a member. Donations are encouraged.

NAME _____

May print name publicly List as anonymous

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Cost to join: *none*

Donation levels:

\$5-15 Individual _____ \$50 Sustaining _____
\$25 Family _____ \$100 TIC-NC Circle _____ Other \$ _____

We need your help! Are you interested in volunteering to help us with?

Data collection _____ Publicity _____ Fundraising _____

Data entry _____ Developing educational materials _____

Other _____

If donating, please make check out to TIC-NC, Inc and mail to:

Tick-borne Infections Council of NC, Inc

PO Box 841

Pittsboro, NC 27312

919.542.5573 info@tic-nc.org www.tic-nc.org