



NFADB Affiliate Network Application

Dear Potential NFADB Affiliate Network Member:

Thank you for your interest in joining the NFADB Affiliate Network! NFADB is committed to creating a strong national network of families.

Affiliates are family groups that join with NFADB to collaborate on activities that improve opportunities and services for individuals who are deaf-blind. The purposes of the NFADB Affiliate Network are to:

- Serve as a conduit for information sharing and partnership
- Improve advocacy at national, state, and local levels
- Influence national trends and legislation
- Provide a platform for leadership development
- Promote NFADB membership

As an affiliate, you will have opportunities to:


- Expand and increase membership
- Promote your organization through the national network
- Partner with other affiliate organizations
- Receive advice regarding how to develop and promote your organization
- Participate in planning NFADB's next Symposium
- Participate in NFADB webinars and other NFADB sponsored activities such as the Family-to-Family Communities Project
- Apply for mini-grants and discounts
- Participate in NFADB workgroups
- Become a part of NFADB Speaker's Bureau

Each organization participating in the NFADB Affiliate Network appoints an Affiliate Liaison. The liaisons meet quarterly via AdobeConnect. Communication is also maintained via phone calls and email. Together, the Affiliate Liaisons develop and implement an action plan that guides our collaborative work.

The following questions are designed to help both you and NFADB determine if the Affiliate Network is a good match for your organization. We welcome the opportunity to talk with you in person should you wish to do so while completing the application.

On behalf of the NFADB Board, thank you for your interest in becoming part of the NFADB Affiliate Network!

Edgenie Bellah

 Edgenie Bellah
NFADB Affiliates Network Coordinator
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NFADB Affiliate Network Application

Date Submitted:

Family Organization Information:

Organization's Name:

Address:

Logo (if applicable):

Website (if applicable):

Proposed NFADB Affiliate Network Representative:

Name:

Address:

Phone: Primary

Secondary

E-mail address:

Position:

Family Organization Information:

Structure – Please tell us a bit about your organization's structure. For example, do you meet/work together in an informal way or are you an official organization (e.g., registered as a non-profit)?

Family Leadership – NFADB values partnership with professionals, but we also strongly believe in the power of family leadership. For that reason, we ask that Affiliate organizations be primarily comprised of and led by families. Please share how leadership is provided within your organization.



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Common Missions:

NFADB values the diversity and autonomy of each family organization within our Affiliate Network. We also recognize that having a shared focus allows for the Network to concentrate on efforts that serve our common missions.

NFADB Mission: We believe that individuals who are deaf-blind are valued members of society and are entitled to the same opportunities and choices as other members of their community.

Please share your organization's mission.

Working with NFADB:

Please share why your organization would like to be an NFADB Affiliate Network member:

Describe specific ideas you have for how NFADB can collaborate with your family organization (e.g., shared webinars, workshops, fundraising):

Describe the type of support you would like to receive from NFADB: