Thank You for Your Support!

Your membership is tax deductible. Please make checks payable to “Lexington” or complete credit card information below and return to:

Lexington Membership
465 N. Perry St.
Johnstown, NY 12095

Please charge my
___ Visa    ___ Mastercard

Amount: $________________________

Card Number: _______________________

3-Digit Security Code: ___________________
(from back of card)

Expiration Date: _______________________

Name: _____________________________
(as it appears on credit card)

Billing Address:
_____________________________________
_____________________________________
_____________________________________

Email: ______________________________

About Lexington

“........and while we have a chapter in every county in New York State, I can honestly say that our Fulton County chapter, Lexington — through its past management and current leadership and board oversight — is one of our strongest and best administered chapters.

Within the NYSARC family, this chapter has a wonderful tradition of active, not passive, advocacy. This chapter doesn’t believe in hunkering down behind its doors and waiting to react to events, but rather, it believes in getting out and shaping events before they happen.”

— Marc Brandt, Executive Director of NYSARC, Inc.

October 2013

Lexington’s mission is to provide the best possible supports to children and adults with disabilities and their families, to be the best possible employer for our employees and to contribute to the community.

Become a member today and help us continue this tradition of excellence.

If you have questions or would like additional information about Lexington, please contact either Shaloni Winston, Executive Director, at (518) 775-5383/shaloni@lexcenter.org or Wally Hart, Division Director for Business & Community Development, at (518) 736-3917/hartw@lexcenter.org.


Help Us Strengthen Our Voice!
Dear Lexington Supporters and Friends,

As we celebrate over 60 years of providing programs and services to adults and children with disabilities, there has never been a more important time for you to become a member of Lexington. The challenges we face today may be greater than at any time in our history as we confront funding cuts, changes in regulations and new mandates. Thanks to our members, Lexington remains strong, even in the face of these challenges. But there is more work to be done.

Recently, when state budget cuts were proposed, our members wrote letters, made calls and visited legislators. These advocacy efforts helped repeal the proposed cut in funding. Your membership strengthens our advocacy efforts and helps us to empower the men and women we support.

In addition to your own membership, you can also sponsor an individual we support to become a member of Lexington, helping them advocate for their own needs. For just $5 you can sponsor one membership. For an additional $50, you can help 10 Lexington program participants become members. Please consider sponsoring some of the over 1,000 individuals we support.

There is strength in numbers. Help us grow even stronger. Please become a member of Lexington today.

Sincerely,

Sandra Maceyka & Wally Hart
Membership Co-Chairs

Please enroll me as a 2014 member of Lexington, Fulton County Chapter, NYSARC, Inc.

Name: _____________________________________________
Street: _____________________________________________
City: ______________________________________________
State: ______________________ Zip: ______________
Phone: ____________________________________________
Email: ____________________________________________

Additional individual members’ names (all members must be at least 18 years of age):

_____________________________________________
_____________________________________________
_____________________________________________

Membership:

_____ Individual: $15
_____ $5 for each additional household member
_____ Supporting: $100
_____ Sponsor: $250
_____ Patron: $500
_____ Benefactor: $1,000
_____ Employee: $5
_____ Lexington program participants: $5

Name of Lexington Program Participant(s):

_____________________________________________
_____________________________________________
_____________________________________________

Membership Given in Memory of:

_____________________________________________

In Honor of:

_____________________________________________

Return to Lexington Membership, 465 N. Perry St., Johnstown, NY, 12095.