

Self Help for
 Hard of Hearing People
 Everett Area Chapter
 Myrna Kain
 1305 W Casino Rd. Apt # C2
 Everett, WA 98204



Meeting: February 11—11:00 AM to 1 PM

**Rap Session:
 “Anything and Everything”
 Concerning Hearing Loss.**

Future Events... Come and join us!

**March 11th —Tentative—Cell and other
 Phones**

**April 1st — Ears, Hearing & Beyond —
 In Seattle (More Info. later)**

**April 8th — Penny Allen — HLAA
 (Hearing Loss Association) —
 HAIL — Hearing Aid Insur
 ance Legislation**

**May 13 — Tentative —Ototoxic Medica
 tions.**

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The views expressed in this newsletter are those of the person submitting the information and not necessarily those held by SHHH.
 Mention of goods and services does not mean endorsement, nor should exclusion suggest disapproval.

SHHH, Everett Area Board

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 DCPearson@wasa-shhh.org or ph: 360.653.6746
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- Karen Pettijohn
- Joyce McDaniel
- Linda Worley
- Lisa MacKay, Professional Advisor

Opportunities for volunteer work

If you want to help, we could use you. We need help in the following areas:

- Web Design
- Fundraising/sponsorship committee
- Newsletter Writing/editing/proofreading
- Newsletter folding/taping/stamping
- Outreach committee
- Hospitality Committee
- Welcome Committee
-

Please contact David Pearson at (Phone) 360.653.6746 or
 (Email) dcpearson@wasa-shhh.org

Check one or more boxes that apply to you.

SHHH, Everett Area Chapter meets monthly Sept. through June (with a picnic in August). The chapter sends out the "Hearing & Beyond" newsletter on the same schedule. We need your support to keep the SHHH, Everett Area Chapter functioning. You can help us continue to support and educate people who are hard of hearing, with an annual contribution from you of:

Check one: New or Renewal

\$13.00 for one person or \$15.00 for a family to join Everett chapter and/or

\$25.00 to become a member of SHHH. This includes the "Hearing Loss" Journal plus other benefits.

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone Number _____ TTY / VOICE

E-mail Address _____

Please make check payable to: *SHHH, Everett Area Chapter.* and mail it along with this form to:

Myrna Kain, Treasurer
 1305 W Casino Rd. Apt # C2
 Everett, WA 98204

Thank You