



Standing Tall For You®

Linking Up for Women

Application

Dear Friend:

Over the years, the National Osteoporosis Foundation (NOF) has heard from hundreds of women with osteoporosis who are interested in participating in a support network that would enable them to communicate with other women with this disease. In response, NOF developed the Linking Up program. Because women have age-related concerns about menopause and medications, Linking Up for women has been divided into two groups.

Linking Up I is an “electronic” support group for women between the ages of 20-50. Linking Up II is an “electronic” support group for women aged 51+. Through these international programs, women communicate with each other via email, telephone and postal mail about their thoughts on and experiences with the diagnosis, prevention and treatment of osteoporosis from a woman’s perspective. If you are interested in contacting other women with osteoporosis, please print out and complete the form below. When you return this form to us, your information will be added to the confidential listing of Linking Up members, and you will receive a copy of the most current participant list.

There are several ways to contact one another, so you decide how this program will work best for you. All information you provide is for use by NOF and Linking Up members *only*. It will not be shared with any outside sources. Please note that we do require that you sign and return this form. In doing so, you ~~NOF~~ permission to include your name and contact information on our participant list. In addition, you agree to maintain the confidentiality of this program and to use this list only for the purpose intended—to contact other women with similar interests and concerns about bone health. For security and privacy, your street address will not appear on the roster of participants

If you have any questions, please feel free to contact the Linking Up Coordinator at 202-223-2226. We hope that you will join Linking Up and find others with whom you can share common concerns.

Please Select: **LINKING UP I FOR WOMEN** _____ **LINKING UP II FOR WOMEN** _____
(Women 50 & under) (Women 51 and Betetr)

Please Print: Name _____ Day Phone _____

Address _____ Evening Phone _____

City, State, Zip code _____

Birth Date _____ Email _____

Please circle: Linking Up members may contact me by:
Phone (9am-6pm) **Phone (6pm-9pm)**

E-mail **Letter**
Signature *(required)* _____ **Date** _____

Please return this form to:
Linking Up
National Osteoporosis Foundation
1150 17th Street, NW, Suite 850
Washington, DC 20036