



NONPROFIT MEMBERSHIP APPLICATION

(Individuals, for-profit corporations, and organizations that have not received a nonprofit status determination letter from the IRS should complete the Associate Membership Application.)

Name of Nonprofit: _____

Organization E-mail: _____

Organization Website: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

Federal Employer Identification Number: _____

Chief Professional Officer: _____ Title: _____

Individual E-mail: _____

Contact Person if Different: _____ Title: _____

Individual E-mail: _____

Annual Membership Dues: \$ _____ *(from chart below)*

One-half Due Now: \$ _____ *(You will be billed for the balance in six months.)*

ORGANIZATION'S ANNUAL BUDGET	DUES
\$1 – \$99,999	\$50
\$100,000 – \$199,999	\$100
\$200,000 – \$399,999	\$150
\$400,000 – \$699,000	\$200
\$700,000 – \$999,999	\$275
\$1,000,000 – \$1,999,999	\$350
\$2,000,000 and above	\$500
Associate Members	\$200

Membership is not active until payment has been received. You may submit payment by check or charge.

Check enclosed (payable to Delaware Association of Nonprofit Agencies)

Charge \$ _____ to my: Visa MasterCard

Account Number: _____ Expiration Date: _____

Cardholder's Name _____

Return to: Delaware Association of Nonprofit Agencies • 100 W. 10th Street, Suite 102 • Wilmington, DE 19801
For information on all member benefits, see our website at www.delawarenonprofit.org.