

## **National Congress of American Indians**

## 2012 - 2013 INDIVIDUAL MEMBERSHIP APPLICATION

become a Member in good standing						
	\$40 Individual Indian Member One Vote, NCAI Broadcasts and Alerts sent to One E-Email -OR- to One Fax, Number, Publications, Reduced Conference Rates, and a Membership Card					
	\$40	Individual Associate Member Non-Voting, NCAI Broadcasts and Alerts sent to Two E-Mail -OR- to One Fax Number, Publications, Reduced Conference Rates for two and a Membership Card				
	\$500	<b>Organization Associate Member</b> Non-Voting, NCAI Broadcasts and Alerts sent to Two E-Mail -OR- to One Fax Number, Publications, Reduced Conference Rates for two and a Membership Card				
	\$1,000 Individual Indian LIFETIME Member Lifetime Voting, NCAI Broadcasts and Alerts sent to One E-mail -OR- to One Fax Numbers, Publications, Reduced Conference Rates and a Lifetime Memebership Card					
	\$1,000	1,000 Individual Associate LIFETIME Member Non-Voting, NCAI Broadcasts and Alerts sent to One E-Mail -OR- to One Fax Numbers, Publications, Reduced Conference Rates and a Lifetime Membership Card				
	Membership will commence after the 69th Annual Convention - October 21 - 26, 2012. Membership is not transferable and may be used only by the person whose name is printed on this form. NCAI is a voluntary membership organization and membership in NCAI does not determine status as a member of any American Indian of Alaska Native Tribe.					
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*Required Fields	*Name:					
	*Title: _					
	*Tribe/Tribal Affiliation/Organization:					
	*Address:					
	*City:			State:	Zip:	
*	*Telephone:					
	*E-Mail Address:					
F.	(Please configure your spam filter to allow NCAI electronic Broadcasts & Alerts)  or Organization Associate Membership Use Only:					
*E-mail Address #2:						
*Website:						
PAYMENT INFORMATION  Enclosed is a Check or Money Order [Mail to: NCAI, 1516 P Street NW, Washington, DC 20005]						
To pay by credit card please call 202-466-7767						
NCAI STAFF USE ONLY [Please do not write in this area]						
Payment Received: \$ Date: Received By:						
Cradit Card Authorization Number				Chack #		