



NADIIIAA Membership Application



Name _____ Title _____
 College/University _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____ E-mail Address _____

Membership	Levels:	Amt Due
___	Group @\$375 for NACDA (15 members) plus \$100 for NADIIIAA (1 individual) dues	\$475
___	Individual @\$175 for NACDA plus \$100 for NADIIIAA dues	\$275
___	NADIIIAA Individual dues ONLY (\$100)	\$100
___	NADIIIAA Additional Member dues (\$75 each)	\$75
___	GA/Intern	\$25
Total Amount Due		\$ _____

Additional members (**up to 15 if you purchased a NACDA Group membership**):

<u>Name/Title</u>	<u>Phone/E-mail Address</u>
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

<p align="center">Payment Information</p> <p>I am paying by check _____ credit card _____ (Checks payable to NADIIIAA) ___ Discover Card ___ MasterCard ___ Visa ___ AMEX (only credit cards accepted) Card Number _____ Exp. Date _____ Name on Card _____ Authorized Signature _____</p>	<p align="center">Please return application and dues to:</p> <p align="center">NADIIIAA Membership 24651 Detroit Rd. • Westlake, Ohio 44145 440-892-4000 • 440-892-4007 (Fax) Contact: Brian Horning • bhorning@nacda.com website: www.nadiiiaa.org</p>
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