

Please complete this form and fax with credit card information or mail check payable to Mississippi Center for Nonprofits to 201 West Capitol Street, Suite 700 Jackson, MS 39201

associate member application

YES! I would like to join the Mississippi Center for Nonprofits as a (please check 1):

- Individual Member (open to individuals not employed by a 501(c)(3))
- Small Business Member (50 or fewer employees)
- Corporate Member (More than 50 employees)
- Government/other 501(c) Organization (such as c4 or c6)

dues

Individual
\$115
Small Business
\$290
Corporate
\$575

dues

government/other 501(c)

Less than \$50,000
\$70
\$50,000 to \$99,999
\$115
\$100,000 to \$249,999
\$175
\$250,000 to \$499,999
\$230
\$500,000 to \$999,999
\$290
\$1 to \$1.99 million
\$345
\$2 to \$3.99 million
\$460
\$4 million or more
\$575

Name of Organization _____

Primary Contact Name _____ Title _____

Address _____

City / State / Zip / _____

Telephone _____ Fax _____

E-mail _____ Website _____

of Full-time Employees _____ Part-Time _____ Volunteers _____

Employer Identification Number _____

Annual Operating Budget _____ Membership Dues _____
(please see chart on left)

payment method

- Check made payable to Mississippi Center for Nonprofits
- Credit Card (Visa or MasterCard Only)

Visa or Mastercard # _____

Name on Card _____

Expiration Date _____ Amount to be charged _____

Signature _____ Date _____