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Institutional Membership APPLICATION

NAI Institutional Membership Includes:

- Upgraded advertising in NAI Career Center
- Subscription to Legacy magazine
- Journal of Interpretation Research (digital subscription, print available for \$35 extra)
- Member pricing for NAI events (including national conference, webinars, and other trainings) and additional discounts on some events, for your staff members
- Affiliation with NAI Regions
- Affiliation with NAI Sections
- Discount on items from the NAI Association Store
- Ability for your staff to purchase Professional and Volunteer/Seasonal memberships at a 20% discount.

Company membership is \$200 and covers the organization and one professional level member who will act as the company contact. Each additional member runs \$60. If you need to add more members than this form allows, please duplicate the last two pages as necessary.

Name of Institution/Organization _____

Contact Person (Professional Member) _____

Address _____

City.State.Zip _____

Work Phone Number _____

Home Phone Number _____

Mobile Number _____

Fax Number _____

Email _____

List all regions and sections for primary contact _____

Region options: 1 (Northeast), 2 (Chesapeake), 3 (Southeast), 4 (Great Lakes), 5 (Heartland), 6 (South Central), 7 (Rocky Mountain), 8 (Southwest), 9 (Sierra Pacific), 10 (Pacific Northwest)

Section options: Cultural Interpretation/Living History (CILH), Council for the Interpretation of Native Peoples (CINP), College and University Academic (CUA), Environmental Education (EE), International Interpretation (INTL), Interpretive Media (IM), Interpretive Naturalist (IN), Interpretation and Tourism (IT), Nature Center Directors/Administrators (NCDA), Spanish (SS), Zoos, Wildlife Parks, and Aquaria (ZWPA)

Payment

\$200 Membership ___ add'l Professionals @ \$60 each ___ add'l Volunteer/Seasonal @ \$40 each

Add a print Journal of Interpretation Research subscription – \$35 US/\$45 international

Total: _____

Credit Card Check

VISA MasterCard AmEx Discover

Cardholder's Name _____

Card Number _____

Expiration Date _____ Security Code _____

Billing Street Address _____

City.State.Zip _____

Signature _____

Additional Members - Professional (\$60) and Seasonal/Volunteer (\$40)

Has all rights of other individual memberships. Memberships submitted with this application will have the same expiration as the main record and are non-transferrable.

Name of Organization _____

Professional (\$60) Seasonal (\$40) Volunteer (\$40)

Name _____

Work Phone Number _____

Home Phone Number _____

Mobile Number _____

Email _____

Regions and Sections _____

Professional (\$60) Seasonal (\$40) Volunteer (\$40)

Name _____

Work Phone Number _____

Home Phone Number _____

Mobile Number _____

Email _____

Regions and Sections _____

Professional (\$60) Seasonal (\$40) Volunteer (\$40)

Name _____

Work Phone Number _____

Home Phone Number _____

Mobile Number _____

Email _____

Regions and Sections _____

Professional (\$60) Seasonal (\$40) Volunteer (\$40)

Name _____

Work Phone Number _____

Home Phone Number _____

Mobile Number _____

Email _____

Regions and Sections _____

For additional members, please duplicate this page.