



Affiliate Member Application

MNA welcomes the support of individuals, consultants, governmental & other exempt entities, and businesses through our Affiliate Membership program. Affiliate members enjoy discounts to trainings and workshops, communications, recognition on the MNA website, and more. Visit the Member Center at www.mtnonprofit.org for a full list of benefits and additional information.

Member Information

Name _____
 Mailing Address _____
 Street Address (if different) _____
 City _____ State _____ ZIP _____ County _____
 Telephone _____ Email _____
 Web site _____

Additional Information *(for consultants, government entities, other exempt organizations and businesses only)*

Organization Name _____
 Executive Director/CEO _____ Email _____
 Contact Person (if other than ED/CEO) _____ Title _____

Annual Dues (Please select the appropriate category)

Individuals <input type="checkbox"/> \$25	Consultants <input type="checkbox"/> \$100	Government / Other Exempt Orgs <input type="checkbox"/> \$100
Business <input type="checkbox"/> \$250 (1-49 full time employees) <input type="checkbox"/> \$500 (50+ full time employees) <input type="checkbox"/> Other \$ _____	Sustainer (Individual, Business, Foundation, etc.) <input type="checkbox"/> \$1,000 <input type="checkbox"/> Other \$ _____	

For individuals only – \$25 memberships are not charitable contributions and as such are not tax deductible. Should you wish to make a tax deductible charitable contribution in addition to joining as an individual affiliate member, please check the box below and indicate the total amount of your payment.

Charitable contribution enclosed with individual membership. Total payment = \$ _____.
 (Example: \$25 membership + \$75 tax deductible charitable contribution = \$100 total payment)

Final Checklist ✓

Make checks payable to **Montana Nonprofit Association** and return this completed form and payment to: Montana Nonprofit Association, P.O. Box 1744, Helena, MT 59624.

Be sure to make a copy of this completed form and keep it for your records.

Office use: IRS ___ Info ___ Thx ___ SF ___ Rpt ___ DIA ___ GSI ___ GSP ___ By ___