



NIRSA Individual Membership Application

First Name _____ MI _____ Last Name _____

Title _____

Institution _____

Mailing Address OFFICE HOME _____

City _____ State _____ Zip _____

Daytime Phone _____ Fax _____

Email _____

NIRSA respects your privacy. Email addresses will be used only for official NIRSA business and will not be sold for any reason. We include email addresses in our online *Recreational Sports Directory* as a networking service to members. You may choose not to have your email address included in this online directory (see below). NIRSA may, at its discretion, provide email addresses to other members who request them (such as committee, state, provincial, or regional leaders) for the sole purpose of conducting official NIRSA business. Any form of commercial use of email addresses is prohibited. Occasionally, NIRSA sells one-time-use postal address labels to approved businesses for the purpose of a single commercial mailing.

Exclude me from: NIRSA KNOW Online directory Habitat professional networking site

Membership type: Professional Student*

* I certify that I am a full-time student (required for Student Membership application)

Signature _____

Status: New Member Renewing Member

Demographic Information (optional):

Gender: Female Male

ADA Needs: Yes No

Ethnic background: African American
 Asian American/Pacific Islander
 Caucasian
 Hispanic
 Native American
 Other

- All new memberships begin in the month that payment is received.
- Student Membership is available to graduate and undergraduate students interested in intramural and/or recreational sports programming.
- Professional Membership is available to all individuals now employed and/or previously directly associated with the administration of intramural and recreation programs.

Membership Dues (for Individuals)

	1 Year	2 Year Option Save 5%	3 Year Option Save 10%
	commencing between 7/1/2011 and 6/30/2012		
Professional Member	\$153	\$291	\$413
Professional Member at Member Institution	\$123	\$233	\$331
Professional Life Member	\$1,401	—	—
Student Member	\$67	\$127	\$181
Student Member at Member Institution	\$56	\$106	\$151

NIRSA National Center
4185 SW Research Way
Corvallis, OR 97333-1067

tel: 541-766-8211
fax: 541-766-8284

email: nirsa@nirsa.org
web: www.nirsa.org

Payment:

Check enclosed (make checks payable to NIRSA; U.S. funds only)

Visa MasterCard Discover American Express

Credit Card Number _____ Expiration Date _____

Signature _____

Person completing this form _____ Person who recommended NIRSA to you _____