



NIRSA Institutional Membership Application

Institution/Agency _____
 Contact Person _____
 Department Director _____
 Department Name _____
 Department Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ Fax _____
 Email for contact person _____
 Website _____

Type of Institution/Agency	Number of Community Served*
<input type="radio"/> 4-year College/University	_____
<input type="radio"/> 2-year College	_____
<input type="radio"/> Correctional Facility	_____
<input type="radio"/> K-12	_____
<input type="radio"/> Non-Profit Organization.....	_____
<input type="radio"/> Private Organization.....	_____
<input type="radio"/> YWCA/YMCA/JCC	_____
<input type="radio"/> Other: _____	_____
<input type="radio"/> Military.....	_____
<input type="radio"/> Parks & Recreation.....	_____

community served*	1 Year	2 Year Save 5%	3 Year Save 10%
	commencing between 7/1/2011 and 6/30/2012		
Four-year Colleges & Universities			
1-1,000	\$430	\$817	\$1,161
1,001-2,500	\$524	\$996	\$1,416
2,501-5,000	\$620	\$1,177	\$1,673
5,001-10,000	\$767	\$1,457	\$2,070
10,001-15,000	\$909	\$1,727	\$2,454
15,001-20,000	\$1,050	\$1,994	\$2,834
20,001-25,000	\$1,239	\$2,355	\$3,346
25,001-30,000	\$1,298	\$2,467	\$3,505
30,001-35,000	\$1,505	\$2,860	\$4,064
35,001 +	\$1,563	\$2,969	\$4,220
Two-year Colleges			
1-1,000	\$289	\$549	\$780
1,001-2,500	\$354	\$673	\$956
2,501-5,000	\$419	\$796	\$1,131
5,001-10,000	\$514	\$977	\$1,388
10,001-15,000	\$614	\$1,166	\$1,657
15,001-20,000	\$702	\$1,333	\$1,895
20,001-30,000	\$797	\$1,515	\$2,152
30,001 +	\$898	\$1,705	\$2,423
Military, Parks & Recreation			
1-2,500	\$325	\$617	\$876
2,501-10,000	\$354	\$673	\$956
10,001-20,000	\$383	\$728	\$1,035
20,001-30,000	\$442	\$840	\$1,194
30,001 +	\$502	\$954	\$1,355

*Community served is the total of all individuals (students, faculty, staff, alumni, etc.) eligible to use recreation facilities/programs offered by the institution.

All new memberships begin on the first day of the month following receipt of dues payment and application unless otherwise arranged with the Membership Department.

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 annual *Recreational Sports Directory* as a networking service to members. You may choose not to have your email address included in this directory. 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.

Free Individual Membership (with paid Institutional Membership)

First Name _____ MI _____
 Last Name _____
 Title _____
 Institution _____
 Mailing Address _____
 Office Home
 City _____ State _____ Zip _____
 Daytime Phone _____ Fax _____
 Email _____

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

Membership type: Professional Student

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

- I would like to receive a paper certificate for my NIRSA Institutional Membership
- Please save the paper, I do not wish to receive a paper certificate for my NIRSA Institutional Membership

Your membership begins the month following dues 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 _____

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 Corvallis, OR 97333-1067 fax: 541-766-8284 web: www.nirsa.org