



National Congress of American Indians

2022-2023 INDIVIDUAL MEMBERSHIP APPLICATION

YES! I support the continuing work and purpose of the National Congress of American Indians and I want to become a Member in good standing

- \$40 Individual Indian Member**
One Vote, NCAI Broadcast emails to one email, Reduced conference rates, copy of our publications throughout the year, One NCAI car decal, Welcome letter with membership card
- \$40 Individual Associate Member**
Non-Voting, NCAI Broadcast emails to one email, Reduced conference rates, copy of our newsletter, the *Sentinel*, One NCAI car decal, Welcome letter with membership card
- \$500 Organization Associate Member**
Non-Voting, NCAI Broadcast emails to two emails, Reduced conference rate for two at each conference, copy of our publications throughout the year, Name listed in web directory of supporters
- \$1,000 Individual Indian LIFETIME Member**
Lifetime Voting, NCAI Broadcast emails to one email, Reduced conference rates, copy of our publications throughout the year, One NCAI car decal, One NCAI T-shirt, Lifetime Membership Card
- \$1,000 Individual Associate LIFETIME Member**
Non-Voting, NCAI Broadcast emails to one email, Reduced conference rates, copy of our publications throughout the year, One NCAI car decal, One NCAI T-shirt, Lifetime Membership Card

Membership is not transferable and may be used only by the person whose name is printed on this form. NCAI is a voluntary membership organization and membership in NCAI does not determine status as a member of any American Indian or Alaska Native Tribe.

I AM INCLUDING A TAX DEDUCTIBLE DONATION OF:

\$50
 \$100
 \$250
 \$500
 Other

***Required Fields**

*Name: _____

*Title: _____

*Tribe/Tribal Affiliation/Organization: _____

*Address: _____

*City: _____ State: _____ Zip: _____

*Telephone: _____

*E-Mail Address: _____

(Please configure your spam filter to allow NCAI electronic Broadcasts & Alerts)

For Organization Associate Membership Use Only:

*E-mail Address #2: _____

*Website: _____

PAYMENT INFORMATION

Enclosed is a Check or Money Order [Mail to: NCAI, 1516 P Street NW, Washington, DC 20005]

NCAI STAFF USE ONLY [Please do not write in this area]

Payment Received: \$ _____ Date: _____ Received By: _____

Credit Card Authorization Number: _____ Check #: _____

For more information or to pay by credit card please call 202-466-7767