

# NonProfit Business Council MEMBERSHIP



Membership is open to any 501 (c) (3) nonprofits operating in Marion County, Florida.

Nonprofit Business:

New Member:

Membership Renewal:

Representative Name:

Representative Title:

Primary E-Mail:

Secondary E-Mail:

Mailing Address:

City:

Zip Code:

Phone:

Website Address:

Applicant Signature:

Date:

Nonprofit Focus:

Arts & Culture

Education

Religious

Public Good

Animals &  
Environment

Health

International

Human Services

Other

## Membership Fees (see table below)

Nonprofit Annual Budget	Membership Fee Paid W/ Check	Membership Fee Paid W/ CC
<input type="checkbox"/> \$0 to \$249,999	\$75.00	\$77.55
<input type="checkbox"/> \$250,000 to \$499,999	\$150.00	\$154.78
<input type="checkbox"/> \$500,000 to \$999,999	\$250.00	\$257.76
<input type="checkbox"/> \$1,000,000 or greater	\$500.00	\$515.20
Affiliate Membership <small>For individuals who may volunteer or have retired from a nonprofit organization.</small>	\$60.00	\$62.04

Check #

Membership Type (Select One)

Organization Membership

Affiliate Membership

Credit Card

Name on Card

Visa

MC

Discover

AMEX

Billing Address:

Card #

Exp. Date:

Security Code:

Zip Code:

I hereby apply for membership in the NonProfit Business Council. I certify that my interest in NPBC is genuine and believe this membership will enhance our nonprofit business, increase our level of professional development and further solidify the Ocala/ Marion County community's voice for the nonprofit community. I pledge to work with the highest level of ethics and integrity. My nonprofit's payment (check/credit card) is included.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_