

CT Office:

19 South Compo Road
Westport, CT 06880
Tel: 203-226-3650
www.INSIDE NGO.org

**DC Office:**

1828 L Street, NW
Suite 300
Washington, DC 20036
Tel: 202-684-3680

October 1, 2010 - September 30, 2011 Membership Renewal

Organization: _____

Primary Contact Name: _____

Title: _____

Address: _____

City: _____ State/Province: _____

ZIP/Postal Code: _____ Country: _____

E-Mail: _____ Web Address: _____

Telephone: _____ Fax: _____

Current Fiscal Year Expense Budget: _____

- Please contact me to discuss how my organization can best benefit from membership and how we can contribute to knowledge sharing within the membership community

Please check the appropriate budget category:

<u>Budget Category</u>	<u>Annual Dues</u>	<u>Budget Category</u>	<u>Annual Dues</u>
<input type="checkbox"/> Under 5 million US\$	\$1,000	<input type="checkbox"/> 100<250 million US\$	\$2,500
<input type="checkbox"/> 5<10 million US\$	\$1,250	<input type="checkbox"/> 250+ million US\$	\$3,000
<input type="checkbox"/> 10<50 million US\$	\$1,500	<input type="checkbox"/> University*	\$3,000
<input type="checkbox"/> 50<100 million US\$	\$2,000	<input type="checkbox"/> Sustaining**	\$4,000

** If you are a discrete project, school, center or unit within a larger university and your project, school, center or unit only is the official member, check the dues category that applies to your project, school, center or unit's budget. If the Membership covers more University entities than yours, check the University rate. **Sustaining Members is a category for members who wish to support InsideNGO beyond their regular dues category.*

- I would like to select a 2 year renewal option to lock in my membership rate. I understand payment for both years is due in full now.

Payment in U.S. dollars

- Check enclosed (payable to **InsideNGO**)

- Charge \$ _____ to my: American Express VISA MasterCard Discover

Account Number: _____ Expiration Date: _____

Cardholder's Name: _____

Signature: _____ Cardholder Phone #: _____

Credit Card Billing Address: _____

Credit Card City: _____ State: _____ Country: _____ ZIP/Postal Code: _____

Please save and print this completed form and send with your check (or credit card information) to:

InsideNGO ♦ 19 S. Compo Road ♦ Westport, CT 06880
or Fax to: (877) 805-0912