



Help US Connect Nonprofits to SUCCESS

Organization: _____

Contact Person: _____ Title: _____

Mailing Address: _____ City/State/Zip: _____

Email Address: _____ Website: _____

Phone: _____ Alternate Phone: _____ Fax: _____

Mission: _____

NONPROFIT ORGANIZATION MEMBERSHIPS

ANNUAL RATE	ORGANIZATIONAL BUDGET
<input type="checkbox"/> \$50.00	Under \$25,000
<input type="checkbox"/> \$100.00	\$25,000 - \$99,999
<input type="checkbox"/> \$150.00	\$100,000 - \$499,999
<input type="checkbox"/> \$200.00	\$500,000 - \$999,999
<input type="checkbox"/> \$250.00	Over \$1,000,000

COMMUNITY PARTNER MEMBERSHIPS

ANNUAL RATE	TYPE
<input type="checkbox"/> \$250.00	Business Affiliate Member
<input type="checkbox"/> \$75.00	Individual Member

Please indicate your membership category and return this form with a check payable to:

Southeast Texas Nonprofit Development Center
700 North Street, Suite O
Beaumont, TX 77701