

# Membership Application

Join online at [www.ncmahq.org](http://www.ncmahq.org) and pay with your credit card. Or, fill out and return the completed registration form and payment to NCMA, PO Box 758747, Baltimore, MD 21275-8747; fax your completed form to 703/448-0939; or call toll-free 800/344-8096. Make checks payable to NCMA.

## Join NCMA Today and Receive

- 12 months of *Contract Management* magazine,
- CMNews and legislative updates,
- Chapter affiliation and local networking opportunities,
- *Journal of Contract Management*,
- *Contract Management Resource Directory*, and
- Discounts on NCMA events, certification, and products.

Please list both home and business addresses and indicate your mailing preference:

Home       Business

### Home Address

Mr.    Mrs.    Ms.    Other \_\_\_\_\_

NAME

UNIVERSITY (IF APPLICABLE)

ADDRESS

APT#

CITY/STATE

ZIP

TELEPHONE

E-MAIL

### Business Address

ORGANIZATION

TITLE

ADDRESS

MAIL STOP/ROOM NUMBER/ETC.

CITY/STATE

ZIP

TELEPHONE

FAX

E-MAIL

WEB SITE

### Chapter Preference (optional)

### Membership Type

New Member/One-Year—\$175

New Member/Two-Year—\$310

New Member/Three-Year—\$430

(Includes \$25 initiation fee.)

Member Pro Vita—\$1250

Renewal Member/One-Year—\$150

Renewal Member/Two-Year—\$285

Renewal Member/Three-Year—\$405

Student Member/One-Year—\$35

This membership is for those individuals who are full-time students in an accredited, degree-granting institution, and do not hold full-time employment in contract management or a related field.

New Professional Member/One-Year—\$110

Includes one-time \$25 initiation fee. This membership is for those individuals who are age 33 or younger on the date of their join or renewal date. New Professionals must list date of birth: \_\_\_\_\_.

Renewal New Professional Member/One-Year—\$85

New Professionals must list date of birth: \_\_\_\_\_.

Retired Member/One-Year—\$65

Individuals who are neither employed nor self-employed, and are current members of NCMA.

### Payment Method

Check enclosed for \$ \_\_\_\_\_

Charge my credit card for:

American Express       Discover

Mastercard               VISA

ACCOUNT #

EXP. DATE

SIGNATURE

NAME ON CARD

PROMOTION CODE (optional)

