



Membership Application

The Wisconsin Nonprofits Association harnesses resources to elevate effectiveness among nonprofit organizations and empower the nonprofit sector. We are a member-based organization and welcome applications for membership from all organizations and individuals that believe in the collective power of nonprofits to enhance society. Memberships are subject to approval by the Wisconsin Nonprofits Association Board of Directors.

Types of Membership Available

Active Membership: Our active membership is for any IRS-designated nonprofit organization. The membership includes voting privileges, full legislative representation, access to convention and meetings, full participation in a statewide nonprofits network, the monthly electronic newsletter and association discounts

Affiliate Membership: Our affiliate membership is for businesses, individuals and governmental entities that support the association's mission. The membership includes access to convention and meetings, limited participation in statewide nonprofits network and the monthly electronic newsletter.

Sustaining Membership: The sustaining membership is for any person not actively engaged in the nonprofit sector but who has formerly been so engaged or who is interested in the welfare of the nonprofit sector in Wisconsin. The membership includes access to convention and meetings and the monthly electronic newsletter.

Desired Membership Type (please check one):

- Active
- Affiliate
- Sustaining

Please Tell Us About Your Organization

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Web site _____

Tax ID _____

Identify Your Organization's Primary Focus (please check only one):

- | | |
|--|--|
| <input type="checkbox"/> Arts, Culture, Humanities | <input type="checkbox"/> Community Services |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Environmental or Animal related |
| <input type="checkbox"/> Education (excluding higher ed) | <input type="checkbox"/> Higher Education |
| <input type="checkbox"/> Health Care (excluding hospitals) | <input type="checkbox"/> Hospitals |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Human Services |
| <input type="checkbox"/> Religious, Spiritual | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Trade Association | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Grantmaker | <input type="checkbox"/> Business |
| <input type="checkbox"/> Government | <input type="checkbox"/> Other: _____ |

Wisconsin Nonprofits Association Membership Application (continued)

Please Share Staff Contacts

<i>Title</i>	<i>Name</i>	<i>Email</i>
Exec Director/CEO	_____	_____
Primary Contact <small>(if not ED/CEO)</small>	_____	_____
Board President	_____	_____

Please designate people within your organization to receive information on the following subjects. If appropriate you may list the same person in more than one category.

<i>Subject Area</i>	<i>Name</i>	<i>Email</i>
Finance	_____	_____
Public Policy	_____	_____
Fundraising	_____	_____
Marketing/Outreach	_____	_____
Technology	_____	_____

Identify the Tax Status of Your Organization

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> 501 (c)(3) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> 501 (c)(4) | <input type="checkbox"/> Check here if your tax status is pending |
| <input type="checkbox"/> 501 (c)(6) | |

Annual Dues Information

Active Membership Dues (based on annual operating budget of your nonprofit):

Annual Operating Budget	Annual Dues
Less than \$249,999	\$75
\$250,000-\$999,999	\$175
\$1,000,000-\$2,999,999	\$300
\$3,000,000 and higher	\$500

Affiliate Dues: \$200

Sustaining Dues: \$100

Method of Payment

- Check enclosed (*payable to Wisconsin Nonprofits Association*)
- Charge my credit card
- Number _____ Exp. Date _____
- Print Name on Card _____
- Signature _____

How did you hear about the Wisconsin Nonprofits Association? _____

Submit Application

Send this completed application (including method of payment) to:
 Wisconsin Nonprofits Association, PO Box 1662, Madison, WI 53701-1662

Membership in the Wisconsin Nonprofits Association does not indicate or otherwise imply endorsement or support by the association for the operation, mission or activities of any member organization. Members may state their membership affiliation with the association in promotional materials as long as the affiliation is not presented in a way that implies endorsement by the Wisconsin Nonprofits Association.