



**NSA Georgia Chapter
STAFF
Application for Membership**

Name: _____

Company: _____

Street Address: _____

City: _____

Mailing Address: _____

If different from above

Phone: () _____ **Fax:** () _____ **Home:** () _____

800: _____ **e-mail address:** _____

Speaker/ Partner: _____

Membership Investment: Membership is good for one year from the date application is accepted and will be renewed in August of each year. Applicant must be employed by a current NSA Georgia Member. **Annual staff membership rate: \$50**

Method of Payment (Check only one)

_____ **Visa** _____ **MasterCard** _____ **Amex**
(\$15 charge for incorrect card number)

Check # _____
(\$25 charge for returned checks)

Card Number: _____ **Exp:** _____

Cardholder Name: _____
(Print as it appears on the card)

Cardholder Signature: _____ **Date:** _____

STAFF Membership of \$50 annually includes the following:

- Invitation to attend the regular monthly program NSA Georgia Chapter at no additional charge
- Invitation to attend optional lunch & afternoon educational sessions at the Associate price
- Invitation for involvement on committees and special projects

Note:

- NSA has set no guidelines for "Staff" category. If, in the future, NSA develops a "Staff" category, the status of this category of NSA Georgia Chapter would be amended to accommodate NSA criteria.
- "Staff" must refrain from identifying themselves as NSA members and are prohibited from using the NSA logo.
- "Staff" cannot advertise in the chapter directory, showcase or publicly represent themselves as chapter members or NSA members.
- Name badges do not have the NSA or NSA Georgia logo.
- "Staff" will not receive the NSA Georgia Chapter newsletter or directory unless requested, as their speaker partner would have a current copy.

**Mail Application and Payment to:
NSA Georgia Chapter
P.O. Box 1248
Dallas, GA 30132**