



Nonprofit Net Inc.

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Membership Renewal Form

ORGANIZATION MEMBERSHIP: Date: _____

Organization Name: _____ Annual Revenue (Approx.): _____

EIN (Federal Identification Number) _____ Website: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Contact: _____ Title: _____

Phone: _____ email: _____

Please tell us about your organization:

Are contributions to your organization tax deductible? Yes No

What is the focus of your organization: _____

Primary Mission: _____

INDIVIDUAL MEMBERSHIP: Date: _____

Name: First _____ Middle _____ Last _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ email: _____

Please us about your nonprofit interests (i.e. Occupation, Affiliations):

MEMBERSHIP REQUIREMENTS AND FEES: Membership is open to all nonprofit organizations, individuals working for nonprofits and those who volunteer in the nonprofit sector. Our membership dues are voluntary. Members are invited to all functions and activities; member organizations are listed on our website; membership information can be updated; events and volunteer opportunities can be posted on our Events Calendar. Donations are welcome and tax deductible.

Suggested Annual Fee:

<i>Organization Annual Revenue</i>	<i>Annual Fee</i>
Up to \$250,000	\$ 100
\$250,000 to \$1,000,000	\$ 150
\$1,000,000 to \$5,000,000	\$ 200
More than \$5,000,000	\$ 250
Individual Membership	\$ 75

Contact Mimi Ballard (781-861-3711, ext. 41 or mballard@researchchild.org) for more information. Please send this membership form and with your check payable to The Nonprofit Net Inc. at the address above. We are a 501(c)(3) nonprofit organization. Donations are tax deductible.

Thank you for your support