



Michigan Nonprofit Association

Membership Application

Name: _____ Title: _____

Organization: _____ Tax ID: _____

Address: _____ City: _____

State: _____ County: _____ Zip: _____

Phone: () _____ Fax: () _____

Email: _____ Website: _____

Referred by: _____

*** YES! I want to strengthen Michigan's nonprofit sector! ***

Membership Dues Structure Nonprofit/Tax-Exempt Organizations

<u>Annual Operating Budget</u>	<u>Annual Dues</u>
\$0 - 100,000	\$ 80.00
\$100,001 – 250,000	\$ 160.00
\$250,001 – 500,000	\$ 270.00
\$500,001 – 750,000	\$ 370.00
\$750,001 – 1 Million	\$ 480.00
\$1,000,001 – 2 Million	\$ 580.00
\$2,000,001 – 4 Million	\$ 790.00
\$4 Million +	\$ 1100.00

Payment Method

Total Amount Enclosed: _____

Check

- Enclosed, payable to **Michigan Nonprofit Association** (mail to the address below)

Charge

- Visa
- MasterCard
- Discover
- American Express

Card #: _____ Exp. _____

Name on Card: _____

Signature: _____

Mail completed application to:
Michigan Nonprofit Association
330 Marshall Street, Suite 200
Lansing, MI 48912

Michigan Nonprofit Association Serves Nonprofits to Advance their Missions
Join or visit MNA online at www.mnaonline.org/membership.aspx