



2024 MEMBERSHIP - Thank you for your participation in the NBSSCA

CHOOSE: Individual Membership Family Membership Business Membership

Name: _____

Company Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Birthday (MM/DD/YY): _____

Email: _____

Interest: _____

Referred by (How did you hear about us?): _____

Are you interested in advertising in the NBSSCA Publications? _____

Opt In/Out: I would like **ALL** of my info in Directory I would like **NONE** of my info in Directory
 I would like my name ___ phone numer ___ email ___ address ___ interests listed

INDIVIDUAL / FAMILY MEMBERSHIP DUES:

- Individual \$50 Domestic (\$75 International) Annual Membership Rate
- Additional \$40 Additional Adult Family Member Name(s): _____
- Youth \$25 Youth (17 years old & younger) Name(s): _____

BUSINESS MEMBERSHIP DUES - Includes advertising in the quarterly print & digital newsletters

- Support \$150 Dues - Business card size ad
- Bronze \$250 Dues - 1/4 page ad
- Silver \$350 Dues - 1/2 page ad
- Gold \$450 Dues - 1/2 page ad plus business card size ad
- Platinum \$550 Dues - Full page ad
- Donation \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Please remit to: NBSSCA, PO Box 301, Simla, CO 80835