

## 2020-2021 **MEMBERSHIP FORM NEW RENEWAL**

CIRCLE ONE:

MEMBER PLUS-\$250	NAME:			
<b>BENEFACTOR</b> benefits PLUS recognition in printed CNTA materials and at events.	Employer:			
BENEFACTOR-\$125.00	Home Address:			
Members receive one Teller Lecture banquet ticket, one ticket to the private Speaker's Reception, invitations to all events, quarterly newsletters and free members' mixers.	CITY/STATE/ZIP CODE:			
	PHONE/CELL #:			
PATRON - \$70.00	EMAIL ADDRESSES: (YOU CAN HAVE NOTICES SENT TO HOME AND/OR WORK)			
Members receive invitations to all events, quarterly newsletters and free members' mixers.		Email is our main means of communication! Be sure to include us on your change of address list if you make any		
SUSTAINING -\$35.00		changes to your contact information.		
Members receive invitations to all events, quarterly newsletters and free members' mixers.	REFERRED BY: (Name & email address if known)			
Young Professional (Under 40) & Student FREE Membership!	<b>VOLUNTEER OPPORTUNITIES:</b> We are seeking volunteers to serve on our committees. If interested, please mark below which committee you are willing to volunteer for:			
Same as Sustaining. Free membership for				
one year! (Can be renewed) Sign up to be a YP Committee Member ->	COMMUNICATIONS: YOUNG PROFESSIONALS:			
	GOLF COMMITTEE:			
Your support makes all				
the difference! Help us continue to be the Voice of	ENDOWMENT FUND: I would like additional information on how to gift to the CNTA Endowment Fund			
Truth on Nuclear Matters!	We are a Non-Profit 501 (c)3 organization, Federal Tax I.D. #57-0953103; Dues and donations are tax deductible based on IRS guidelines			
To Pay by Check or Cash: Mail to address listed below. To Pay by Credit Card: Pay online at our website, or complete the form below then email this form to us at cnta@bellsouth.net. (financial information will be stored and destroyed appropriately)				
CNTA, 1204 Whiskey Road, Suite B, Aiken SC 29803 Phone: 803-649-3456; Email: cnta@bellsouth.net Website: <u>www.cntaware.org</u>				
For Internal Lice Only: Data received:	Amount	Chaole # Cradit Card Charge: (Vac (Na)		

For Internal Use Only: Date received:	Amount	Check # C	Credit Card Charge: (Yes/No)			
IF PAYING BY CREDIT CARD (we add a \$2 card processing fee):						
Name on Card:	Billing Zip Cod	e: Amount to Charg	e:Today's Date:			
Card Number:	Expirat	ion Date:	Security Code:			
I hereby Authorize CNTA to Charge my card for the amount listed above (Sign here)						
Note- Receipts emailed! If you want it to a different address please provide here:						