

# NATIONAL RURAL HOUSING COALITION

1331 G Street, N.W., 10<sup>th</sup> Floor, Washington, DC 20005 • (202) 393-5225 • fax (202) 393-3034 • <http://ruralhousingcoalition.org/>

## 2018 ANNUAL MEMBERSHIP INVOICE

### BASIC INFORMATION

Name: \_\_\_\_\_ Organization: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### MEMBERSHIP DUES

Memberships run for one year. Make checks payable to NRHC, 1331 G St. NW, 10<sup>th</sup> Fl, Washington, DC 20005.

#### ORGANIZATION MEMBERSHIP

*Dues are based on your organization's annual housing budget. Includes a subscription to all Coalition publications.*

- |  |         |
|--|---------|
| <input type="checkbox"/> NEW MEMBERS             | \$250   |
| <input type="checkbox"/> \$300,000 or less       | \$500   |
| <input type="checkbox"/> \$300,000 - \$700,000   | \$1,500 |
| <input type="checkbox"/> \$700,000 - \$1,000,000 | \$3,000 |
| <input type="checkbox"/> Over \$1,000,000        | \$4,000 |

**SUBTOTAL** \$ \_\_\_\_\_

#### INDIVIDUAL MEMBERSHIP

- Individual Membership \$100

*Please check to add or renew subscription to the following:*

- Budget Bulletin Subscription \$250  
 Rural Housing Reporter Subscription \$250

**SUBTOTAL** \$ \_\_\_\_\_

#### ADDITIONAL CONTRIBUTIONS

\_\_\_ Yes, I would like to make an additional contribution (*Check appropriate box and indicate the amount*):

- |   |          |   |          |
|---|----------|---|----------|
| <input type="checkbox"/> Single Family Hsg Task Force | \$ _____ | <input type="checkbox"/> HUD Task Force         | \$ _____ |
| <input type="checkbox"/> Self Help Hsg Task Force     | \$ _____ | <input type="checkbox"/> General Operating Fund | \$ _____ |
| <input type="checkbox"/> Farmworker Hsg Task Force    | \$ _____ |   |          |

**SUBTOTAL** \$ \_\_\_\_\_

#### ADDITIONAL STAFF CONTACTS

*Each organizational member can add up to five (5) additional staff members to receive NRHC emails:*

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

#### TOTAL AMOUNT ENCLOSED

Organization Membership Subtotal	\$ _____
Individual Membership Subtotal	\$ _____
Additional Contribution Subtotal	\$ _____
<b>TOTAL</b>	\$ _____