

National Pollution Prevention Roundtable Membership Application

Please Print

Types of Membership:

(Mark a Box)

- | | |
|---|-------|
| <input type="checkbox"/> Organization - 3 Members | \$400 |
| <input type="checkbox"/> Individual | \$150 |
| <input type="checkbox"/> Student | \$30 |

Membership Lapse Date (office use): _____ Application Date: _____

Organization: _____ OID (office use): _____

Contact Person (if different from Primary Member): _____ Title: _____

Telephone: _____ Fax: _____ E-Mail: _____

Address: _____

City, State/Province: _____ Zip: _____

Primary Member: _____ Member # (office use): _____

Title: _____

Telephone: _____ E-Mail: _____

For Organizational Memberships Only

Second Member: _____ Member # (office use): _____

Title: _____

Telephone: _____ E-Mail: _____

Third Member: _____ Member # (office use): _____

Title: _____

Telephone: _____ E-Mail: _____

Payment Options: (We accept: Visa, MasterCard, Discover Card, & American Express)

Amount \$ _____ (US dollars) Billing Street Address & Zip Code _____

Credit Card - Name of Card Holder _____

Card Number _____ Exp. Date ____/____

Authorized Signature _____

Check (payable to NPPR)

NPPR
11 DuPont Circle, Suite 201
Washington, DC 20036
Phone: 202-299-9701
Fax: 202-299-9704
E-Mail: Angela@p2.org

