



Northwest Ohio Gerontological Association

# 2012 MEMBERSHIP APPLICATION FORM\*

NOGA'S MEMBERSHIP YEAR RUNS JANUARY 1 THROUGH DECEMBER 31, 2012

**PLEASE PRINT YOUR INFORMATION BELOW CLEARLY.**

**NAME** \_\_\_\_\_  Ms.  Mrs.  Mr.  Sr.  Dr.

**CONTACT INFORMATION:** (RENEWALS ONLY ~ IF THERE ARE NO CHANGES, PLEASE PROCEED TO DUES SECTION)

PLACE OF EMPLOYMENT \_\_\_\_\_

TITLE/POSITION \_\_\_\_\_

This is my  work  home MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

TELEPHONE NUMBERS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Cell or  Home Number      Work Number      Ext.      Fax Number

E-MAIL ADDRESS\* \_\_\_\_\_

*\*our preferred method of communication with our members – please print clearly and completely*

WEBSITE ADDRESS \_\_\_\_\_  WEBSITE LINK SUBSCRIPTION

**DUES:** Please check the appropriate selection(s)\*  PAYMENT RECEIPT REQUESTED (SENT VIA EMAIL)

\_\_\_\_\_ \$30.00 Individual Member  RENEWAL

\_\_\_\_\_ \$15.00 Senior Citizen (65+ years of age and retired)  NEW MEMBER

\_\_\_\_\_ \$15.00 Student (send evidence of full-time enrollment in an academic program)

\_\_\_\_\_ \$25.00 Website Link Subscription Fee (Please attach a **2012 WEBSITE LINK FORM** (see [WWW.NOGAONLINE.ORG](http://WWW.NOGAONLINE.ORG)))

\_\_\_\_\_ **TOTAL ENCLOSED**

**CEUs:**  Please check if you need a **CERTIFICATE OF ATTENDANCE** for continuing education clock hour purposes  
**CERTIFICATES OF ATTENDANCE** are sent as a secured PDF file following the meeting

**COMMITTEES:** I am interested in the following committees: (please visit [WWW.NOGAONLINE.ORG](http://WWW.NOGAONLINE.ORG) for descriptions)

\_\_\_\_\_ Advocacy      \_\_\_\_\_ Communications/Public Relations      \_\_\_\_\_ Hospitality      \_\_\_\_\_ Program

**SPEAKERS BUREAU:** I would like to be listed as a presenter in the NOGA SPEAKERS BUREAU listing:  Yes  No

I am available to speak on the following topics: \_\_\_\_\_

*\*Please contact the NOGA Office at [NOGA@BEX.NET](mailto:NOGA@BEX.NET) or (419) 841-8889 if you require an invoice for billing purposes or NOGA's tax ID number.*

**PLEASE RETURN THIS FORM ALONG WITH YOUR CHECK (PREFERRED METHOD) PAYABLE TO NOGA to:**

NOGA  
6111 Chaney Drive  
Toledo, OH 43615

*\*PLEASE NOTE, A NOGA MEMBERSHIP IS INDIVIDUAL AND NOT ORGANIZATIONAL AND IS NON-TRANSFERABLE.*