



MEMBERSHIP APPLICATION

Company: _____ Date: _____

Contact Name/Designations: _____ Position/Title: _____

Address: _____

City/State/Province/County/Zip or Postal Code: _____

Telephone: _____ Fax: _____

Email Address: _____ Website: _____

Toll-Free: _____ Referred By (Name/Company): _____

SELECT CATEGORY OF MEMBERSHIP

If joining in the months January – April use full dues schedule. Membership will expire at the end of the year joined.
If joining in the months May – August use prorated dues schedule. Membership will expire at the end of the year joined.
If joining in the months September – December use full dues plus schedule. Membership will expire at the end of the following year joined.

SERVICES RENDERED

(please indicate all that apply):

- Aerial Trucks
- Distributor
- Electrical Contractor
- Equipment and Tool Sales
- Lighting Contractor
- Manufacturer
- Sign Contractor
- Vehicle Sales

GENERAL MEMBER

Companies that provide or contract labor, materials, or design/consulting services for the purpose of providing lighting maintenance services including: electrical contractor, energy service company (ESCO), lighting maintenance service, lighting & energy consultants.

General Member Annual Dues:

	Full Dues	Prorated Dues	Full Dues Plus
\$5,000,000 or more	\$2,600.00	\$1,750.00	\$2,800.00
\$3,000,000 to \$4,999,999	\$2,075.00	\$1,400.00	\$2,275.00
\$1,000,000 to \$2,999,999	\$1,475.00	\$980.00	\$1,675.00
up to \$999,999	\$750.00	\$500.00	\$950.00

ASSOCIATE MEMBER

Specialty lighting distributor, manufacturer, utilities, or associations.

Associate Member Annual Dues:

	Full Dues	Prorated Dues	Full Dues Plus
	\$1,000.00	\$700.00	\$1,200.00

PROFESSIONAL MEMBER

A professional member is an individual not otherwise eligible for general membership. Lighting professions such as corporate energy managers and professional energy managers may qualify as professional members. Professional members must obtain their CLMC certification within one year of joining the Association.

Professional Member Annual Dues:

	Full Dues	Prorated Dues	Full Dues Plus
	\$500.00	\$350.00	\$700.00

ADDITIONAL REPRESENTATIVES at main office to receive mailings and information and to be included in membership directory.

Name: _____ Designation(s): _____

Position/Title: _____ Telephone: _____

Fax: _____ Email Address: _____

Name: _____ Designation(s): _____

Position/Title: _____ Telephone: _____

Fax: _____ Email Address: _____

ADDITIONAL BRANCH OFFICES AND REPRESENTATIVES

Please note that member offices receive Lighting, Management and Maintenance (LM&M), NALMCO's s quarterly publication and are included in the Membership Directory. *(Please use duplicate forms for additional branch offices and respresentatives).*

Branch listing in Membership Directory plus LM&M subscription.....\$150.00 per branch (other than main office).

Name/Designation(s): _____ Position/Title: _____

Address: _____

City/State/Zip or Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

Email Address: _____

Name/Designation(s): _____ Position/Title: _____

Address: _____

City/State/Zip or Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

Email Address: _____

TO CHARGE PAYMENT FOR MEMBERSHIP DUES, PLEASE COMPLETE THE FOLLOWING:

MasterCard Visa American Express

Account Number: _____ Expiration Date: _____

Name on Card: _____ Amount of Charge: _____

Toll-Free: _____ Signature: _____

REMIT THIS FORM WITH YOUR DUES CHECK PAYABLE TO NALMCO:

1255 SW Prairie Trail Parkway • Ankeny, Iowa 50023

Phone: (515) 243-2360 • Fax: (515) 334-1174

E-mail: memberservice@nalmco.org • www.nalmco.org

Federal statutes require this notice: Contributions, gifts, or dues paid to NALMCO® are not deductible as charitable contributions for federal income tax purposes, but may be deductible as a business expense.