



National Association of Professional Organizers

North Carolina Chapter

Membership Application

Contact Information

First Name: _____ Last Name: _____

Company Name (®, ™): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail: _____ Mobile Phone: _____

Web Site: <http://> _____ NAPO Membership #: _____

Emergency Contact: Name: _____ Phone: _____ Address: _____

Attach proof of current NAPO membership to this application. Current membership in NAPO is required prior to joining NAPO-NC. A lapse in NAPO membership will result in cancellation of NAPO-NC membership. No refunds will be given.

Organizing Specialties

Provisional NAPO Members (member for less than one year): Skip this section.

Active NAPO Members (member for 1 or more years): Your profile on the Chapter web site, NAPONC.ORG, lists up to 10 free organizing specialties. These specialties must be the same as or be a subset of your current specialties listed on NAPO.NET. Each specialty beyond 10 costs \$3/year. Select one:

- I do not require more than 10 specialties listed this year.
- I require _____ extra specialties listed in my NAPONC.ORG profile.

Active NAPO Members Renewing Chapter Membership: Please compare your specialties currently listed on NAPONC.ORG with your specialties on NAPO.NET. If your specialties on NAPONC.ORG are *not* up-to-date and *do not* match (or are *not* a subset of) your specialties on NAPO.NET, you must contact the Chapter Communications & Technology Director.

- I will promptly contact the Communications & Technology Director to make sure my specialties listed are correct. I understand that my specialties can only be updated at time of my membership renewal.

Volunteer Information

NAPO-NC is a non-profit organization run by a volunteer Board of Directors. In addition to our Board, there are numerous opportunities to volunteer within our organization, allowing us to grow and remain a strong and active Chapter. Please indicate ways in which you might be interested in volunteering for NAPO-NC:

I prefer to volunteer (select all that apply):

- At home
- On the computer
- On the phone
- On a team
- By myself
- During the day
- During the evening
- On short-term, specific projects
- On long-term, strategic projects

I have the following skills or interests that I could contribute to NAPO-NC:

- Marketing/PR
- Sales
- Fundraising
- Event Planning
- Operations
- Writing/Editing
- Educational Program Planning
- Web Site/Technology-related interests
- Membership-related interests
- Financial/Bookkeeping
- History
- Library
- Hospitality

I prefer not to volunteer at this time.

Calculate Your Fees:

New Members:

One Time New Member registration fee: \$45.00

Annual dues for current fiscal year (**see chart below**)

Local: less than 60 miles from zip code 27560,
your dues are \$75 per year (pro-rated as shown below) _____

Distant: greater than 60 miles from zip code 27560,
your dues are \$60 per year (pro-rated as shown below) _____

TOTAL FEES: _____

Today's Month →	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Local Dues	\$56.25	\$50.00	\$43.75	\$37.50	\$31.25	\$25.00	\$18.75	\$12.50	\$6.25	\$75.00	\$68.75	\$62.50
Distant Dues	\$45.00	\$40.00	\$35.00	\$30.00	\$25.00	\$20.00	\$15.00	\$10.00	\$5.00	\$60.00	\$55.00	\$50.00

Renewing Members:

Annual Dues are due on October 1.

Local: less than 60 miles from zip code 27560,
your dues are \$75 per year _____

Distant: greater than 60 miles from zip code 27560,
your dues are \$60 per year _____

Add \$30.00 late fee if application/payment is postmarked after Oct. 15.* _____

Add an additional \$45.00 fee to reinstate information after Oct. 30.* _____

Extra Specialty Listing Fees (if applicable): _____

Number of specialties declared on page 1 x \$3. _____

Discount (Must be board approved; please state reason): _____

TOTAL FEES: _____

- Please note that if you're paying by PayPal, your application is still due on October 1.
- Please note that after Oct. 30, the member's contact information will be removed from the NAPO-NC Web site and Yahoo Group. An additional \$45 fee will be required to reinstate your information.

By signing this I agree to have my e-mail address added to the OrganizeNC Yahoo Group mailing list so that I can receive important information regarding my NAPO-NC membership.

Signed: _____ Date: _____

Received By: _____ Date: _____

Application & fees valid
10/1/09 – 10/30/10.

Download current
application at naponc.org.

Method of Payment: Check Cash Check Number: _____

I understand that it is required to attached proof of my current NAPO membership to this application and have done so.

*Please send completed application with payment to:
NAPO-NC, PO Box 1086, Morrisville, NC 27560*

*New Members: It is strongly encouraged that you attend
a FAQ Session with NAPO-NC's VP (see
NAPONC.ORG calendar).*