



# 2 Year Membership Dues

January 1, 2020 – December 31, 2021

NEW  RENEWAL- NICOA ID#: \_\_\_\_\_

### Individual (Personal) Membership Information (Please print or type clearly, one person per form)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Note:** This is your personal membership, please provide personal contact information so that we can update you about NICOA.

**Billing or Tribal contact:** Contact information if someone other than the Elder is paying on their behalf

SELF OR  Billing Tribe/Organization \_\_\_\_\_

Contact Name/Title: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### VOTING MEMBERS ONLY – Complete this section and attach a copy of CDIB/proof of enrollment:

A qualified voting member is “any Indian 55 years of age or older who is an enrolled member of an Indian Tribe, Band, or Combination of Bands and Tribes, recognized by the United States Department of the Interior”. PLEASE ATTACH A COPY OF PROOF OF TRIBAL ENROLLMENT OR CDIB CARD. If your CDIB card is not available- **you must have your tribe’s authorized enrollment official attest to the following.** The person

above is a registered member of the \_\_\_\_\_

Tribe. Date of Birth: \_\_\_\_\_ CDIB / Enrollment Number is: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  N/A

Certified by (please print): \_\_\_\_\_ Phone: \_\_\_\_\_

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

### MEMBERSHIP TYPE: (requirements and specifics on other side) Please Check one:

- 1. **Voting Member-** Must be 55 yrs+ and a member of a Federally recognized tribe: (online/CC \$158)  \$150
- 2. **Associate Member (non-voting)-** Any person who is not a voting member: (online/CC \$263)  \$250
- 3. **Organization Associate Member-** Non-voting (1) organization member: (online/CC \$525)  \$500

Mail this form with payment by Check or Money Order Payable to NICOA at:

National Indian Council on Aging  
Cheryl Archibald (Membership Dues)  
8500 Menaul Blvd. NE, Ste. B470  
Albuquerque, NM 87112

For questions please call: Cheryl J. Archibald Attn:  
(505) 292-2001 or [carchibald@ncoa.org](mailto:carchibald@ncoa.org)

**Registration for the 2020 American Indian Elders Conference**  
**Begins January 1, 2020** Watch our website: [www.nicoa.org](http://www.nicoa.org)

#### NICOA USE ONLY

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Membership #: \_\_\_\_\_ GZ Invoice: \_\_\_\_\_

Date to Finance: \_\_\_\_\_ Check #/Amount: \_\_\_\_\_

**NO REFUNDS FOR MEMBERSHIP DUES, CAN BE TRANSFERRED UPON WRITTEN REQUEST**

## 2 Year Membership Dues:

January 1, 2020 – December 31, 2021

**NEW**                       **RENEWAL- NICOA ID#:** \_\_\_\_\_.

1. Check the box if this is a NEW membership or a RENEWAL, if it is a renewal please provide your NICOA ID number, isn't required but is easier to process.
2. Provide your (the members) name, address, phone, and email address.
3. Provide the Billing or Tribal contact for the person/organization that is paying for the membership. If you are paying for yourself, check the SELF box and add the billing information *if it is different from the contact information*.
4. VOTING MEMBERS ONLY: please provide a copy of your tribal enrollment document, either a copy of the card/letter.
  - a. IF you are renewing your membership and have sent us your CIB before, we have it on file and will let you know if we need a copy.
  - b. Please write in your tribe's name, your CIB number, Expiration date, if applicable, and your Date of Birth, even if you attach the card.
  - c. IF you do not have a copy of your CIB card, have a tribal official fill out this section and provide a signature and phone number if there are any questions.
5. DETERMINE YOUR membership type:
  - a. **Voting Member:** any American Indian or Alaska Native that is registered with a federally recognized tribe and is 55 years older or older
  - b. **Associate Member:** Anyone who doesn't qualify to be a voting member
  - c. **Organization Associate Member:** Any organization, that wants to have one representative part of NICOA

**Please note:** n n you qualify as a voting member it is the most cost-effective way to come to the NICOA Conference.

- IF you are a title VI attendee, and you are not a voting member of NICOA, you DO NOT PAY a membership fee for the Title VI attendee rate at the conference.
- IF you want to vote in your caucus session, you MUST BE a registered voting member of NICOA.

6. Payment: Check the box next to the type of membership you are purchasing:
  - a. Voting member: \$150 (\$158 online & Credit Card)
  - b. Associate member: \$250 (\$263 online & Credit Card)
  - c. Organization Associate member: \$500 (\$525 online & Credit Card)

7. Mail this form, your CIB card, and payment to the address on the previous side, send any comments or questions to Cheryl Archibald, (505) 292-2001 or [carchibald@nicoa.org](mailto:carchibald@nicoa.org)

Once NICOA receives your payment you will receive your membership card in the mail, keep this card in a safe place and bring it with you to the NICOA Conference, you may win a prize.

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