



# 2023-2024 Membership Dues

January 1, 2023 – December 31, 2024

**Purchase your membership now for a discounted rate at the 2023 AI/AN Elders Conference**

## 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

Other Org OR  Billing Tribe/Organization \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

A qualified voting member is “any American Indian or Alaska Native 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 TRIBAL ENROLLMENT OR CDIB CARD. If your CDIB card is not available, please provide the information below.

Tribes: \_\_\_\_\_

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

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 \$160)  \$150

**2. Associate Member (non-voting)-** Any person who is not a voting member: (online/CC \$265)  \$250

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

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

NICOA USE ONLY

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ To Finance: \_\_\_\_\_ Check or GZ Invoice#: \_\_\_\_\_ Amount: \_\_\_\_\_

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