



**Membership Application Form**  
*for 501c3 nonprofit organizations*

<b>MEMBER INFORMATION</b>			
Organization Name:			
Mailing Address:	City:	State:	Zip:
Street Address ( <i>if different</i> ):	City:	State:	Zip:
Website:	Phone Number:		
Does your nonprofit have a Facebook page: Yes or No ( <i>circle one</i> )			
# of full-time employees ( <i>35+ hours/week</i> ):		# of part-time or seasonal employees:	
# of volunteers:			
Year Incorporated:		Federal EIN:	
Mission:			
<b>CONTACT PERSON</b>			
First Name:		Last Name:	
Position/Title:		Email:	
<b>EXECUTIVE DIRECTOR/CEO (<i>if different from above</i>)</b>			
First Name:		Last Name:	
Position/Title:		Email:	
<b>GEOGRAPHIC REGION SERVED</b>			
<input type="radio"/> Pittsylvania County <input type="radio"/> Danville City <input type="radio"/> Caswell County              Other: _____			
<b>ANNUAL MEMBERSHIP DUES</b>			
Please refer to the information below to determine your annual membership dues. Annual budget should be based on your most recently completed fiscal year. Membership will be active for 12 months from the date that dues are received. Check the appropriate box.			
Annual Budget	Annual Dues	Annual Budget	Annual Dues
<input type="checkbox"/> \$0 - \$50,000	\$35	<input type="checkbox"/> \$100,001 – \$250,000	\$100
<input type="checkbox"/> \$50,001 – \$75,000	\$50	<input type="checkbox"/> \$250,001 – \$500,000	\$150
<input type="checkbox"/> \$75,001 - \$100,000	\$75	<input type="checkbox"/> \$500,001+	\$200
<b>PAYMENT INFORMATION</b>			
Make checks payable to: Dan River Nonprofit Network. Complete this form and mail it with your dues, or submit it in person to our office, at 308 Craghead St., Suite 104, Danville, VA 24541 (we are the 2 <sup>nd</sup> office space on the right once you enter the United Way building).			
<b>QUESTIONS</b>			
Call 434-792-3700 ext. 226 or email danrivernonprofitnetwork@gmail.com			

(Office Use) Date Received: \_\_\_\_\_

Renewal Date: \_\_\_\_\_