

National Leather Association – Indianapolis Chapter

Membership Application

New Renewal Update

Personal Information:

Name on Membership Card: _____

Last Name: _____ First Name: _____ Initial: _____

Mail Name: _____ Birth Date: ____ / ____ / ____

Mail Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ - _____ - _____ OK to send Postal Mail : Yes No

Email : _____ @ _____

Optional Demographic Information:

Age: 18 - 29 30 - 39 40 - 49 50 - 59 60 - 69 70+

Gender: Female Male Transgendered Other

Orientation: Gay/Lesbian Heterosexual Bisexual Pansexual

Membership Information:

Fee Schedule

Application Date	Supporting Member	Full Member	International Member
July - Sept	\$ 10.00	\$ 20.00	\$ 20.00
Oct - Dec	\$ 7.50	\$ 15.00	\$ 15.00
Jan - Mar	\$ 5.00	\$ 10.00	\$ 10.00
Apr - May	\$ 2.50	\$ 5.00	\$ 5.00

Indianapolis Supporting Member – Allowed to attend events, participate in meetings, participate in the email lists. Not allowed to vote or hold office.

Indianapolis Full Member - Allowed to attend events and meetings, participate in the email lists, vote and hold office (if additional requirements for the office are met).

List any previous member #'s and select which membership level you are choosing:

Full Member # _____

Supporting Member # _____

International Member – Membership in NLA-International is separate from your NLA-Indianapolis membership. International membership is a requirement to run for or hold office in the NLA-Indianapolis Chapter.

International Member # _____

I have read the NLA-Indianapolis Mission Statement and I agree with the goals of NLA-Indianapolis and wish to become a member. I agree to abide by the rules set forth in the By-Laws and Policies and Procedures Manual. I understand that the information on this form will be handled according to the confidentiality rules set forth in the Policies & Procedures. I attest with my signature that I am at least 18 years of age and eligible to be a member.

Legal Signature : _____

Date : _____

Printed Name : _____

Money Paid \$ _____

Please make your check or money order payable to NLA-Indianapolis. Mail the completed membership application and payment to:
 NLA-Indianapolis
 PO Box 971
 Indianapolis, IN 46206-0971

After receiving your application and verifying your ID the members will vote to approve or deny your membership at the next business meeting. If your membership is denied your Membership fee will be refunded. Falsification of information on this application can be grounds for expulsion from NLA-Indianapolis and NLA-International.

For use by NLA-Indianapolis Rev Date 12/2008

Name and Age verified by EC or MC member Signature : _____ Date : _____

Application voted on by members at meeting Date : _____ APPROVED / DENIED