

# Associate Member Renewal Application

## NAPO Seattle Area Chapter



Please write **legibly** as we use this information for our website and database.

The following information will be posted on [www.SeattleNAPO.com](http://www.SeattleNAPO.com)

Business Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Contact: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Email address: \_\_\_\_\_ Website: \_\_\_\_\_

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The following information will be used for our internal membership database:

Address: \_\_\_\_\_ Suite/Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Focus of Products or Services:

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Membership Dues: \$250.00

- Annual dues are non-refundable. Dues are based on November 1 - October 31 year.
- By signing below I agree to abide by and model my behavior according to the NAPO Code of Ethics. ([http://napo.net/get\\_organized/ethics.html](http://napo.net/get_organized/ethics.html))
- All data on this form is accurate. I permit NAPO-Seattle Area Chapter to release my business information for the chapter website and chapter sponsored publicity.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail with check to: **NAPO Seattle Area Chapter, Attn: Katie Munoz, 17234 NE 116<sup>th</sup> Street, Redmond, WA 98052**