MEMBERSHIP APPLICATION

MEMBERSHIP OPTIONS AND RATES

Premier ($700 - $6,050) Includes all full-time employees working in the agency and up to 10 advocate members who serve on park and recreation boards or advisory councils, are in elected or appointed civic roles, or are community volunteers. Agencies may add as many part-time employees as they would like, if they exceed the package membership size then rate will increase.

Standard ($470) Includes up to three professional members working in an agency or other environments such as: universities, colleges, military base installations, hospitals, health clinics and not-for-profits; also includes ability to add professional members within the same organization at a rate of $175 and add advocate members at a rate of $80.

INDIVIDUAL RATES

Professional ($180) For park and recreation professionals working in agencies or other environments, such as like-minded non-profit organizations, universities, colleges, military base installations, and hospitals or health clinics.

Young Professional ($115) For individuals that are 35 and under; working at least part-time in parks and recreation or another related field.

Student ($35) For full or part-time students studying park and recreation curricula; not simultaneously employed as a full-time professional in that field.

Retired ($80) For individuals that have retired from parks and recreation.

Advocate ($80) For individuals who serve on park and recreation boards or advisory councils, are in elected or appointed civic roles, or are community volunteers.

SUPPLIER RATES

Industry Supplier Individual ($180) For individuals who work for companies other than non-profit organizations.

Industry Supplier Premier Package ($700 - $6,050) Please see Premier package rates and qualifications

*Visit nrpa.org for additional membership benefits information.
NRPA MEMBERSHIP APPLICATION

1: CONTACT INFORMATION

Prefix __ First Name ____________ Middle Initial __ Last Name ____________ Suffix ____________
Title ____________________________
Organization ______________________
Address __________________________
City __________________ State _______ Zip _______ Country ____________
Phone __________________ Fax _______ Email __________________ Web site address ____________
Birthdate ___ / ___ / ______ (Mandatory for young professional membership category)
Estimated Date of Graduation ___ / ___ / ______ (Students Only)

Occupation (check one):
☐ Park & Recreation Professional
☐ Armed Forces Recreation Professional
☐ Advocate/Civic Leader
☐ Consultant
☐ Educator/Researcher
☐ Supplier
☐ Non-Profit Service Provider
☐ Volunteer/Coach
☐ Retired Professional
☐ Student
☐ Related Profession (Landscape Architect, Agronomist, Historian, Mechanic, MBA, etc.)

Employer Type
☐ College or University
☐ Federal Government
☐ Independent Consulting Firm
☐ Landscape Architect/Design Firm
☐ Municipality/Park District/County
☐ Playground Equipment Supplier Manufacturer
☐ School District
☐ State Government

Jurisdiction Type:
☐ County
☐ Educational Institution
☐ Military
☐ Rural
☐ Special Park District
☐ State
☐ Suburban
☐ Urban

Occupational Level (check one):
☐ Staff
☐ Middle Management
☐ Executive Management

Communication Preferences
NRPA makes available its members' addresses (excluding telephone and email) to vendors who provide products and services to the park and recreation community. Please check here if you prefer not to be included in these lists.
☐ Exclude from list

Education Level:
☐ Doctorate
☐ Bachelor's
☐ Master's
☐ Associates
☐ Some College
☐ High School

2: MEMBERSHIP CATEGORY SELECTION

Individual Rates
☐ Professional $180
☐ Young Professional*** $115
☐ Advocate $80
☐ Retired $80
☐ Student $35*
☐ Industry Supplier $180

Premier Package*
(Based on No. of Full-Time Employees plus any Part-time Employees - optional)
☐ 1-10 $700
☐ 11-20 $900
☐ 21-50 $1,200
☐ 51-1,000 $4,350
☐ 1,001+ $6,050

Additional Packages
☐ Standard Package+ $470
Professional Add-on ___ X $180 =
Advocate Add-on ___ X $80 =

*Primary contacts for Premier package applications will be sent an email with roster submission instructions once the application is processed.
**Please complete roster information in section 5.
***Please submit a copy of driver’s license or government issued ID noting birth date along with application.
†Proof of student status required, please submit a copy of one of the following with application: an original letter on the institution’s letterhead signed by any qualified representative from your university program, student ID with valid dates, or a current transcript.
‡Students will have access to the digital magazine. To purchase a physical copy, please add a subscription in Section 3: Subscription Options.

3: SUBSCRIPTION OPTIONS

If you wish to purchase additional magazines, indicate quantity below.
$46 per annual subscription x _________ =

4: SUMMARY AND PAYMENT

Full payment required for processing. Forms received without payment or authorized purchase order will be returned.

Total (by section) Amount
Membership Selection (from section 2) ___ $________
Subscription Options (from section 3) ___ $________
Grand Total (U.S. Funds) ___ $________

Please make checks payable to: National Recreation and Park Association (NRPA)
☐ Purchase order

Credit Card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover
Credit Card Number: _____________________________ Security Code: _____________________________
Expiration Date: ___________ Name on Credit Card: _____________________________
Billing Address: _____________________________

Signature: _____________________________

For Internal Use: _____________________________
NRPA MEMBERSHIP APPLICATION

5: ROSTER AND ADD-ONS FOR STANDARD PACKAGE

If you are applying for the Premier Package, you will receive an email with instructions to provide your full roster after your application is processed.

Package Member #2
Prefix __ First Name ___________________________ Middle Initial __ Last Name ___________________________ Suffix __________
Title ___________________________
Phone ___________________________ Fax ___________________________ Email ___________________________
Address
☐ Same as Primary Contact
☐ Preferred Mailing
Address ___________________________
City ___________________________ State _______ Zip ___________________________ Country ___________________________

Package Member #3
Prefix __ First Name ___________________________ Middle Initial __ Last Name ___________________________ Suffix __________
Title ___________________________
Phone ___________________________ Fax ___________________________ Email ___________________________
Address
☐ Same as Primary Contact
☐ Preferred Mailing
Address ___________________________
City ___________________________ State _______ Zip ___________________________ Country ___________________________

Professional Add-on #1
Prefix __ First Name ___________________________ Middle Initial __ Last Name ___________________________ Suffix __________
Title ___________________________
Phone ___________________________ Fax ___________________________ Email ___________________________
Address
☐ Same as Primary Contact
☐ Preferred Mailing
Address ___________________________
City ___________________________ State _______ Zip ___________________________ Country ___________________________

Professional Add-on #2
Prefix __ First Name ___________________________ Middle Initial __ Last Name ___________________________ Suffix __________
Title ___________________________
Phone ___________________________ Fax ___________________________ Email ___________________________
Address
☐ Same as Primary Contact
☐ Preferred Mailing
Address ___________________________
City ___________________________ State _______ Zip ___________________________ Country ___________________________