

NSA MEMBERSHIP

PAID-UP-FOR-LIFE APPLICATION



MEMBER ID#

PREFIX	FIRST NAME	MI	LAST NAME	SUFFIX
INFORMAL/NICKNAME			TITLE/POSITION	
AGENCY/ORGANIZATION				

WORK ADDRESS:

☐ PREFERRED MAILING ADDRESS ☐ PREFERRED BILLING ADDRESS

STREET ADDRESS	
MAILING ADDRESS (IF DIFFERENT)	
CITY	
STATE/PROVINCE	
ZIP	
COUNTRY	
PHONE	
TOLL FREE	
FAX	
WEB SITE	

HOME ADDRESS:

☐ PREFERRED MAILING ADDRESS ☐ PREFERRED BILLING ADDRESS

STREET ADDRESS	
MAILING ADDRESS (IF DIFFERENT)	
CITY	
STATE/PROVINCE	
ZIP	
COUNTRY	
PHONE	
FAX	

PREFERRED EMAIL ADDRESS			
CELL PHONE		DATE OF BIRTH	

GENDER (CHECK ONE) ☐ MALE ☐ FEMALE

CONTINUE TO OTHER SIDE

NSA MEMBERSHIP

PAID-UP-FOR-LIFE APPLICATION (CONTINUED)



PAID-UP-FOR-LIFE STRUCTURE (PLEASE CHECK ONE)

(Applicants must provide proof of age, i.e., a copy of valid driver's license, passport, birth certificate, or military I.D.)

REGULAR		RETIRED	
AGE	DUES	AGE	DUES
☐ 24-29	\$741	☐ 40-44	\$400
☐ 30-34	\$618	☐ 45-49	\$364
☐ 35-39	\$568	☐ 50-54	\$328
☐ 40-44	\$515	☐ 55-59	\$291
☐ 45-49	\$468	☐ 60-64	\$255
☐ 50-54	\$421	☐ 65-69	\$218
☐ 55-59	\$375	☐ 70-74	\$182
☐ 60-64	\$328	☐ 75-79	\$146
☐ 65-69	\$281	☐ 80+	\$ 91

Dues subject to change.

SUBSCRIPTIONS

☐ IN ADDITION to my free copy of *Sheriff* I would like to subscribe to *Deputy and Court Officer Magazine* = \$25 for 4 issues

I WOULD LIKE TO MAKE A DONATION TO THE NSA SHERIFF'S RELIEF FUND IN THE AMOUNT OF	\$
PAYMENT TOTAL	\$

PAYMENT INSTRUCTIONS

☐ CREDIT CARD ☐ CHECK / MONEY ORDER (PAYABLE TO NATIONAL SHERIFFS' ASSOCIATION)
TYPE OF CARD: ☐ AMERICAN EXPRESS ☐ VISA ☐ MASTERCARD ☐ DISCOVER

CREDIT CARD NUMBER		EXP DATE	
NAME AS IT APPEARS ON CARD		SECURITY CODE*	
SIGNATURE			

Note: All Paid-Up-For-Life Memberships are non-transferable and non-refundable and are only available to members currently paying \$45 annual dues. This program does not include sheriffs or international members.

*3-digit number found on the back signature panel of the VISA, MASTERCARD, DISCOVER or 4-digit number found on the front of the AMERICAN EXPRESS.

RETURN COMPLETED FORM WITH PROOF OF AGE TO FAX NUMBER (703) 838-5349 OR MAIL TO NATIONAL SHERIFFS' ASSOCIATION, ATTN: MEMBERSHIP, 1450 DUKE ST, ALEXANDRIA, VA 22314

FOR FURTHER INFORMATION ABOUT NSA AND MEMBER BENEFITS, PLEASE VISIT WWW.SHERIFFS.ORG OR CALL (800) 424-7827 WITH QUESTIONS.