NSA MEMBERSHIP SHERIFF PAID-UP-FOR-LIFE APPLICATION



MEMBER ID#

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

AGENCY/ORGANIZATION

WORK ADDRESS:				HOME ADDRESS:				
O PREFERRED MAILING ADDRESS O PREFERRED BILLING ADDRESS			O PREFERRED MAILING ADDRESS O PREFERRED BILLING ADDR					
	STREET ADDRESS			STREET ADDRESS				
	MAILING ADDRESS (IF DIFFERENT)			MAILING ADDRESS (IF DIFFERENT)				
	CITY			CITY				
	STATE/PROVINCE			STATE/PROVINCE				
	ZIP			ZIP				
	COUNTRY			COUNTRY				
	PHONE							
				PHONE				
	TOLL FREE			FAX				
	FAX							
	WEB SITE							

PREFERRED EMAIL ADDRESS		
CELL PHONE	DATE OF BIRTH	

GENDER (CHECK ONE)

O MALE O FEMALE

NSA MEMBERSHIP SHERIFF 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.)

		OPULATION 00 or less		COUNTY POPULATION of 100,000 or more			
	AGE	DUES		AGE	DUES		
Ο	25-29	\$1,283	О	25-29	\$2,567		
0	30-34	\$1,069	О	30-34	\$2,138		
Ο	35-39	\$985	Ο	35-39	\$1,968		
0	40-44	\$942	О	40-44	\$1,883		
Ο	45-49	\$855	Ο	45-49	\$1,711		
Ο	50-54	\$770	Ο	50-54	\$1,541		
0	55-59	\$734	О	55-59	\$1,370		
0	60-64	\$598	Ο	60-64	\$1,198		
0	65-69	\$514	О	65-69	\$1027		
0	70-74	\$428	О	70-74	\$855		

Dues subject to change.

I WOULD LIKE TO MAKE A DONATION TO THE NSA FOUNDATION IN THE AMOUNT OF	\$
PAYMENT TOTAL	\$

PAYMENT INSTRUCTIONS

O CREDIT CARD	Ο	CHECK / MONEY ORDER (PAYABLE TO NATIONAL SHERIFFS' ASSOCIATION)							
TYPE OF CARD:	0	AMERICAN EXPRESS	0	VISA	O MAST	ERCARD	0[DISCOVER	
CREDIT CARD	NUM	BER					EXP DATE		

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 current sheriff 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/CONTENT/LIFETIME-MEMBERSHIP OR CALL (800) 424-7827 WITH QUESTIONS.