



National Fraternal Congress of America (NFCFA) Application for Associate Membership

- Affiliate.** Available to individuals and organizations providing products or services to member-societies.
- Foreign Society.** Available to fraternal benefit societies legally authorized to transact life, health or accident insurance business in jurisdictions other than the United States.
- Fraternal Friend.** Available to organizations operating under the lodge system that are domestic fraternal societies described in section 501(c)(10) of the Internal Revenue Code or fraternal benefit societies described in section 501(c)(8) of the Internal Revenue Code that are not authorized to transact insurance.
- Non-Profit Partner.** Available to organizations that regularly partner with member-societies to achieve common charitable/fraternal goals.

Please see the NFCFA Constitution at www.nfcenet.org for a full description of Associate Member rights and benefits.

Annual Dues - Associate Membership

Affiliates	\$1,000
Foreign Societies	\$1,000
Fraternal Friends	\$1,000
Non-Profit Partners	Complimentary

Date: _____

Name: _____

Title: _____

Company/Organization: _____

Tax Status: (please select one)

___ For Profit Company

___ Non-Profit

___ 501(c)(8)

___ 501(c)(10)

___ 501(c)(3)

Other: _____

Address: _____

City, State, Zip-Code: _____

Telephone: _____ FAX: _____

E-Mail: _____ Website: _____

Description of company or organization that can be used during the approval process and for inclusion on the NFCA Web site (100 words or less).

Total enclosed: \$ _____

Payment: By credit card (please fill out the information below)

By enclosed check (*please make check payable to NFCA*)

Credit Card

Your Name (as it appears on card): _____

Type of card (circle one): VISA MC AMEX DISC

Account Number: _____

Expiration Date (mm/yy): _____

CVV2/CVC2: _____ (3 or 4 digit security number)

Credit Card Billing Address 1: _____

Credit Card Billing Address 2: _____

City: _____

State: _____

Zip: _____

Please email, fax or send this form with payment information to:

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Oak Brook, IL 60523
Phone: (630) 522-6322
Fax: (630) 522-6326
nfca@nfcnet.org