

MEMBERSHIP/RENEWAL FORM

All prospective members of NVEC are required to complete this registration form. Indicate any changes; Membership is for one year except Lifetime Memberships. NEW MEMBERSHIP RENEWAL Changes for directory? SECTION I: MEMBER CONTACT INFORMATION TITLE Mrs Mr Miss Ms **NAME BUSINESS NAME ADDRESS I** MAIN TELEPHONE **WORK TELEPHONE ADDRESS 2** (if different) HOME TELEPHONE **ADDRESS 3** TOWN/CITY **MOBILE PHONE ZIP CODE PRIMARY EMAIL** JOB TITLE: **SECONDARY EMAIL** *Star the e-mail and phone number you would like listed in the directory **SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS MEMBERSHIP** Please **MEMBER TYPE** DESCRIPTION **DUES** (Annual) Check \$25 (\$400 INDIVIDUAL/LIFETIME Individuals 18 and older, annual or lifetime membership Lifetime) **STUDENT** Individual youth under 18 in the year of membership \$15 All families, defined as 2 adults and any children under the age of 18 **FAMILY** \$40 permanently residing in the household For-profit businesses with less than 15 employees, and for-profit **SMALL BUSINESS &** and non-profit associations actively involved in equine-related \$150 **ASSOCIATIONS** activities For-profit wholesale or retail businesses, professionals, etc with 15-**LARGE BUSINESS** \$300 40 employees For-profit wholesale or retail business, professionals, etc with 41 or **CORPORATE BUSINESS** \$500 more employees PAYMENT METHOD ☐ Venmo/Zelle ☐ Personal/Business Check ☐ Online Payment For full Membership descriptions see website https://nvequinecouncil.org/members **SECTION 3: MEMBER INFORMATION OCCUPATION /JOB TITLE: Do you subscribe to the NVEC mailing list? Y** or **N** lf no, would you want to be subscribed? (provide e-mail address if not listed) Would you like to be listed in the NVEC directory? ☐ Yes ☐ No Please indicate if you would be willing to **serve on a committee**: Yes Not at this time Is there a specific issue you would like to help with or committee you would like to serve Permission to use photographic images: Photographs of NVEC members may be used in various NVEC communications incl. the newsletter and website. Please indicate your permission for use: NVEC has my permission to use and identify photographs of me. NVEC does not have permission to use and identify photographs of me. NVEC must contact me before using any identified photographs of me in NVEC communications. Signature: Date: To pay by check: Send a check made payable to To pay online: Go to https://nvequinecouncil.org/members Nevada Equine Council to:

Nevada Equine Council, PO BOX 1184, Silver Springs, NV 89429

Regardless of payment method used, please **make sure to send a copy of your membership form** to info@nvequinecouncil.org