

**CONTACT INFORMATION**

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Website \_\_\_\_\_

Primary Contact Person \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

Additional Contact Persons (to receive the VANNO Voice e-newsletter, and other communication)

Name \_\_\_\_\_ Title \_\_\_\_\_ E-Mail \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ E-Mail \_\_\_\_\_

**TYPES OF MEMBERSHIP**

**Nonprofit Organizations:**

<u>Annual Operating Budget</u>	<u>VANNO Dues</u>
<input type="checkbox"/> Less than \$25,000	<b>\$ 50</b>
<input type="checkbox"/> \$25,000 to \$100,000	<b>\$ 100</b>
<input type="checkbox"/> \$100,000 to \$500,000	<b>\$ 200</b>
<input type="checkbox"/> \$500,000 to \$1 Million	<b>\$ 300</b>
<input type="checkbox"/> Greater than \$1 Million	<b>\$ 500</b>

Primary Type of Activity  
(please check one)

Health                       Religion Related  
 Education                    Environment or Animals  
 International               Human Service  
 Arts & Culture               Recreation/Sports  
 Professional or Trade Association  
 Other \_\_\_\_\_

# Full-time employees: \_\_\_\_\_  
 # Part-time employees: \_\_\_\_\_  
 # Volunteers: \_\_\_\_\_

**Individual** (those who support VANNO's mission & do not represent a nonprofit or business):  **\$ 50**

**Individual Consultant Membership** (includes listing on website, with link to your site):  **\$ 150**

**Corporate Membership** (includes listing on VANNO website, with link to your site):  **\$ 500**

**PAYMENT**

**Check:** please make payable to **VANNO**.                      *Term of membership is 12 months from receipt of payment.)*

**Credit Card:**    Visa or MasterCard # \_\_\_\_\_ Expiration \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form with payment to:** Virginia Network of Nonprofit Organizations  
1108 East Main Street, Suite 1200, Richmond, VA 23219

**Questions?** 804-565-9871 or info@VANNO.org