Individual Membership Application – 2010

(For Individuals Only – See Below)

Individual Name: _____

Company Name: _____ Email:_____

Address: _____ City:_____

State/Prov.: _____ Postal Code: _____ Country: _____

Phone: _____ Facsimile: _____ Website:_____

Those who can apply for Individual Membership are persons who formerly have been involved in the information destruction business and who wish to remain connected to the Association; and professionals involved in information and/or security management.

I am someone:

☐ Formerly involved in the information destruction business

☐ Professional responsible for information management and/or security management

My current responsibility or position is:

☐ Accounting/Financial Management

☐ Education

☐ Healthcare Administration

☐ Human Resources Management

☐ Information Technology

☐ Legal Administration

☐ Records & Information Management

☐ Other (please indicate):

_____

Why are you applying for NAID Membership? _____

_____

How were you made aware of NAID? _____

Please note that Individual Members are not eligible to vote or hold office in the Association.

PAYMENT INFORMATION

Calculation:

2010 Individual Membership Dues (pro-rated July 1, 2010 – December 31, 2010) **$ 272.50**

TOTAL REMITTANCE: **USD $ _____**

Payment is by:

☐ Enclosed Check (Payable to "NAID") Check No.:_____

☐ AmEx ☐ MasterCard ☐ Visa Card # _____-_____-_____-_____ Expires (mo/yr): ____/____

Name on Card: _____ Signature: _____

The information provided by me in this application is truthful and accurate.

Signature: _____ **Date:** _____

Mail to:
NAID International Headquarters
1951 W. Camelback Rd., Suite 350, Phoenix, AZ 85015

FAX to (only if paying by credit card):
NAID
(602) 788-4144

NAID Use Only					
Rec'd:_____	GM:_____	Member#:_____	Website: _____	Com. Notice:_____	MP Sent: _____