



Application for Membership

_____ This is an organization membership _____ This is an individual membership



Name of Organization _____

Address _____

City _____ State _____ Zip _____

Website _____

Mission _____

Name of Individual _____

Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Years in Development _____ Years in This Position _____

Dues enclosed:

_____ Membership fee: \$100.00

Please note: The membership fee is good for only one person per organization. Each additional person will be required to pay a **guest fee of \$25.**

Please send this form and your check payable to:

Inland Northwest Development Council
P.O. Box 3786
Spokane, WA 99220-3786

Please keep your information up to date through www.inlandnwdevcouncil.org.