

Professional Membership Application

July 1, 2018 to June 30, 2019



PLEASE PROVIDE ALL INFORMATION REQUESTED

Check One: New Member
 Renewing Member & How long have you been a member? _____ years

Name _____ Title _____

Agency _____ Certifications _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ E-Mail _____

MEMBERSHIP CATEGORIES

Select your membership type below and indicate your affiliations.

Individual Membership:

- Full Time Professional, \$200
- Part Time Professional, \$120
- Student Not-Employed Full Time in the Profession, \$35
- Retired Professional or Friend, \$70

Group Membership:

For large organization/department of 3+ members:

- First Three Professionals, \$200 Each x _____
- Additional Professional, \$100 Each x _____
- Policy/Advisory Board/Commission/Council/Committee, \$340

University/College Membership:

- All Full Time Faculty and Students in the Discipline, \$500
- Up to 4 Full Time Campus Recreation Dept. Staff, \$500

Attach a list of all individuals covered under group membership, including all information requested above. For students include name and school email only.

District Affiliation by County

(Select One)

- 1 Bergen, Hudson, Passaic
- 2 Essex
- 3 Union
- 4 Middlesex, Monmouth, Ocean
- 5 Atlantic, Cape May, Cumberland, Salem
- 6 Burlington, Camden, Gloucester, Mercer
- 7 Hunterdon, Morris, Somerset, Sussex, Warren

Section Affiliations:

(Select all that apply)

- Aquatics
- Community Recreation
- Individuals with Disabilities
- Multicultural Affairs
- Park Resource
- Active Adults/Seniors (Interest Group)

Membership Directory

- I would like to receive a printed copy of the membership directory, for an additional \$10. (Must renew by 7/31)

MAKE CHECKS & VOUCHERS PAYABLE TO NJRPA

MAIL or FAX FORM WITH PAYMENT or PURCHASE ORDER TO:
 New Jersey Recreation & Park Association
 1 Wheeler Way, Princeton, NJ 08540
 FAX (609) 356-0475
 OR info@njrpa.org

FORM OF PAYMENT:

- Check # _____
- PO/Voucher # _____
- VISA M/C # _____
- Card Exp. Date _____
- Signature _____

FOR QUESTIONS

Call (609) 356-0480 or Visit



RENEWAL DEADLINE IS July 31, 2018

Membership services cut-off for non-renewals is August 1, 2018

Office Use ONLY: CP _____ INV/PO Sent _____ MC _____ Web _____ Letter _____ Paid _____