



# MEMBERSHIP / RENEWAL FORM

## National Prostate Awareness Association

All prospective members of NPAA are required to complete this registration form. Indicate any changes;  
 Membership runs from July 1st-June 30th.  **NEW MEMBERSHIP**  **RENEWAL**

### SECTION 1: MEMBER CONTACT INFORMATION

<b>TITLE</b>	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms
<b>NAME</b>				
<b>ADDRESS 1</b>			<b>MAIN TELEPHONE</b>	
<b>ADDRESS 2</b>			<b>WORK TELEPHONE</b> (if different)	
<b>ADDRESS 3</b>			<b>HOME TELEPHONE</b>	
<b>TOWN/CITY</b>			<b>MOBILE PHONE</b>	
<b>ZIP CODE</b>			<b>PRIMARY EMAIL</b>	
<b>JOB TITLE:</b>			<b>SECONDARY EMAIL</b>	

### SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
<b>FULL</b>	Full Membership (dues used for picture ID, signature lapel pin, support mobile testing unit)	\$30.	
<b>GIVE A MEMBERSHIP</b>	Give A Membership Member	\$30	
<b>COMMUNITY SUPPORTER</b>	Community Supporter membership is open to all who share NPAA's objectives or wish to help advance them but cannot become full members (restricted from voting, holding office or chairing committees)	\$20	
<b>INSTITUTIONAL</b>	Institutional Membership is open to institutions working in the medical field. Membership allows transfer of membership to replacement personnel.	\$20 per member	
	For Membership descriptions see website <a href="http://natlpaa.org/">http://natlpaa.org/</a>		
<b>PAYMENT METHOD</b>	<input type="checkbox"/> Personal Check <input type="checkbox"/> Online Payment <input type="checkbox"/> Institutional Check		

### SECTION 3: ADDITIONAL MEMBER INFORMATION

**Sign me up for the following email list(s):**  
 **Action Alerts** - Prostate Cancer Awareness Initiative  
 **NPAA News** - Newsletter  
 **Promotions** - Get latest information on events, and products/services.

**Do you subscribe to the NPAA News?** Y  or N  If no, would you want to be subscribed?  
 (provide e-mail address if not listed)

**Permission to use photographic images:**  
 Photographs of NPAA members may be used in various NPAA communications incl. the newsletter and website. Group photographs taken at NPAA events may be used without identifying individual members. For individual photographs, please indicate your permission for use:  
 NPAA has my permission to use and identify photographs of me.  
 NPAA does not have permission to use and identify photographs of me.  
 NPAA must contact me before using any identified photographs of me in NPAA communications.

Date: \_\_\_\_\_

**To pay online:** Go to <http://natlpaa.org/become-a-member/>

**To pay by check:** Send a check made payable to NPAA to:

NPAA, P.O. Box 1723

Decatur, GA 30031

Phone: (404) 769-4483

Toll Free: 1 (877) 298-7728

Fax: (678) 515-3671

Regardless of payment method used, please **make sure to send a copy of your membership form to** [info@natlpaa.org](mailto:info@natlpaa.org)