



**NC Go!**  
**2019 Membership Application**

Complete this form and submit a copy with your check. Retain a copy of this page for your billing purposes. This is your receipt.

	Please return membership renewal payment to: <i>NC Go!</i> PO Box 14147 Durham, NC 27709
<b>Description:</b> <i>NC Go!</i> 2019 Membership Dues	<b>2019 Dues (Calculate by using table on next page)</b>
	<b>Fed EIN# 47-4028937</b>

**Process**

1. Calculate dues for your organization by using the chart on the reverse side.
2. Make checks payable to *NC Go!* and mail to the address above.
3. Please complete this form and return **TODAY**.

Organization \_\_\_\_\_

Contact Name (Circle One: Mr. Mrs. Ms.) \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

County \_\_\_\_\_ E-mail \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Please include me in the <i>NC Go!</i> Advocacy Network:    Yes <input type="checkbox"/> No <input type="checkbox"/>	
Home Address _____	
<b>To correctly link you to your elected representatives, we require your voting/home address (No P.O. Boxes). You will NOT receive correspondence at this address unless it is your only listed address.</b>	
City _____ State _____ ZIP _____	

Please complete and return to:  
**NC Go!**  
**PO Box 14147 Durham, NC 27709**

**Dues Structure on Reverse Side**