



The Georgia Chapter of NIGP, Inc.



2018 Membership Application

New Member - \$40 Renewal - \$40 Retired - No Dues

PLEASE RETURN FORM WITH PAYMENT

Member Since: _____
Month / Day / Year

Member ID #: _____

Birthday: _____
Month / Day

Name: _____

Title: _____ **Agency:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email Address: _____ **Work phone:** _____ **Work fax:** _____

Optional: (Home Address) _____

Optional: (Home E-Mail) _____

Are you a member of National NIGP? Yes No

Are you a member of Coastal Georgia Chapter? Yes No

Are you a member of GPAG? Yes No

Professional Certification(s) Earned: CPPO CPPB Other: _____

Indicate your interest in serving on a committee: Awards & Scholarships Conference & Program Education
 Expo Historian Member At Large Membership Multimedia Public Relations

Member Signature

Date

Chapter Fiscal Year: Jan 01 through Dec 31.

Please Mail Dues with Application

ATTENTION! GO TO WWW.GANIGP.ORG AND UPDATE YOUR MEMBER PROFILE TO RECEIVE INFORMATION REGARDING UPCOMING EVENTS AND NEWS

Federal ID Number: 58-2440880

Please Make Checks Payable To: Georgia Chapter of NIGP, Inc.

Mail To: Cheryl Bullock

Atlanta Public Schools (APS),

130 Trinity Avenue, SW, Atlanta, GA 30303

Phone 404-802-2484 Email: Membership@ganigp.org