



INVOICE

APPLICATION/RENEWAL 2017 **AFFILIATE**
MISSOURI CHAPTER NAHRO

AFFILIATE NAME: _____

CONTACT PERSON/ TITLE: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

Email Address: _____

TELEPHONE: _____ FAX: _____

INTERESTED IN SERVING ON COMMITTEE ____ YES ____ NO

- _____ Housing Committee
- _____ Professional Development Committee
- _____ Community Revitalization and Development Committee.
- _____ Commissioners Committee
- _____ Member Services Committee

AFFILIATE MEMBERSHIP FEE

Membership Fee	\$150.00
Web Advertisement	<u>\$50.00 (optional)</u>
	\$200.00

(non housing agencies or companies only)

Payment Method: Make Checks Payable to Missouri NAHRO, A 5% Credit Card Processing Fee will be charged for each registration.

Check # _____ Amount \$ _____ Credit Card # _____

Credit Card Exp. Date: _____ CID Code _____

Name as it appears on Credit Card: _____

Billing Address of Credit Card: _____ City/St/Zip: _____

Contact Person: _____ Phone #: _____

PLEASE FORWARD CHECK MADE PAYABLE TO:
MISSOURI CHAPTER OF NAHRO

**Send to: Shelli Scrogum
MONAHRO Service Office
12246 FM 1769
Graham, TX 76450
940-521-9982**