



Individual (Personal) Membership Information (Please print or type clearly, one person per form). This is your personal membership, please provide personal contact information so that we can update you about NICOA. 1. Name: \_\_\_\_\_ DOB:\_\_\_\_\_ 2. PERSONAL Mailing Address: City: \_\_\_\_\_\_ Phone: \_\_\_\_\_ 3. Email Address: 4. Billing or Tribal contact: Contact information if someone other than the Elder is paying on their behalf Contact Name: \_\_\_\_\_Email Address: \_\_\_\_\_ ☐ Other Organization OR ☐ Billing Tribe/Organization \_\_\_\_\_ Mailing Address: City: State: Zip: Email Address: Phone: 5. VOTING MEMBERS ONLY – Complete this section and attach a copy of CDIB/proof of enrollment: A qualified voting member is "any American Indian or Alaska Native 55 years of age or older who is an enrolled member of an Indian Tribe, Band, or Combination of Bands and Tribes, recognized by the United States Department of the Interior". PLEASE ATTACH A COPY OF YOUR TRIBAL ENROLLMENT OR CDIB CARD. **6. MEMBERSHIP TYPE:** (requirements and specifics on other side) **Please Check one: Voting Member-** Must be 55 yrs.+ and a member of a federally recognized Tribe: (online/CC \$160) □ \$150 Associate Member (non-voting)- Any person who is not a voting member: (online/cc \$265) \quad \$250

Mail this form with payment by Check or Money Order Payable to NICOA at:

National Indian Council on Aging
Attn: Billie Tohee (Membership Dues)/Accounting
8500 Menaul Blvd. NE, Ste. B470
Albuquerque, NM 87112

NICOA USE ONLY

Received by:	To Finance:	Date:	

## **Membership Instructions**



## Thank you for supporting the National Indian Council Aging, Inc. Instructions are below.

- **1. Name** please provide your name.
- 2. <u>Personal</u> Mailing Address NICOA would like to be able to reach our community to inform you of upcoming events that you may be interested in. No junk mail, etc. We will NEVER sell your information or share it with anyone without your permission.
- **3. Email Address** We would like to keep you updated about what is happening and add you to our Newsletter list with valuable information about what is happening in Indian Country. We will never sell or share your information without your written permission.
- **4. Billing or Tribal Contact** Contact information of the person, tribe, or organization that is paying the membership dues for the person listed above. If you are paying your own dues, leave this section blank. We ask for this information if there is a billing question.
- **5. Voting Member Only** This section needs to be filled out for a Voting Member; this is a person that is 55+ years of age and is an enrolled member of a federally recognized Tribe. Please attach a copy of your Certificate Degree of Indian Blood (CDIB) or Tribal enrollment letter.
- **6. Membership Type-** Check the box next to the type of member you are.
  - Voting Member- Must be 55 years or older and an enrolled member of a federally recognized American Indian or
    Alaska Native tribal entity. A Voting Member can attend their regional caucus session at the conference, vote on
    resolutions, and elect their regional representative on the NICOA Board of Directors. Additionally, Voting Members
    play a role in shaping NICOA's direction for the next two years and receive a reduced conference registration fee.
    Voting on the regional representative occurs every four years, spanning two conferences.
  - Associate Member (non-voting)- Any person who does not qualify to be a Voting Member.

Please fill out one form per person. Once the form is completed, please send the following to NICOA.

- Membership Dues Form
- CDIB or Tribal Enrollment Letter
- Payment

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If you have any questions, please contact the NICOA office at (505) 292-2001 or email billietohee@nicoa.org.

NICOA Membership Dues Revised 12/02/2024 2