



Associate Member Application Form

Nonprofit Ally

Office Use Only: Do not write in this space

Date Received: _____
Date Approved: _____
Dues Received: _____
Payment Information: _____

The undersigned does hereby apply for Associate Membership in the Association of Partners for Public Lands, a California nonprofit corporation, as a Nonprofit Ally. This category of Associate membership is defined as an organization that supports the public lands community but is not affiliated with a particular park, forest, monument, or refuge.

The benefits of this Associate Member category are the same as for Nonprofit Members, with the exception of voting privileges.

(Organizations that have both nonprofit status and a signed agreement with a public land site(s) should complete the Nonprofit Membership Application.)

CONTACT INFORMATION

Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____ E-mail: _____ Web site: _____

Primary Contact: _____ Title: _____

ABOUT YOUR ORGANIZATION

Please provide the following information on a separate sheet with your completed application form:

1. Brief narrative about your organization
2. List of agency(ies) or public lands you work with
3. Number of members (if any)
4. Number of staff (if any)
5. General description of programs/activities
6. General description of programs/activities

State of Incorporation: _____ Date of Incorporation: _____

Designated Representative: _____ Board Chair/Principal Staff: _____

Signature _____ Print name _____ Title _____ Date _____

All membership applications must be approved by the APPL Board of Directors. Members agree to abide by the bylaws of the Association of Partners for Public Lands.

MEMBERSHIP DUES

Dues will be set at \$1500 annually. Payments by credit card will be assessed a 3% processing fee. Please include your payment with this application.

Method of Payment: Check # _____ (Payable to APPL) Visa MasterCard

Card # _____ Expiration Date _____

Name on Card _____ Signature _____

Please send this form to the address listed below or fax to 301.946.9478. If you have any questions, please call 301.946.9475, or e-mail appl@appl.org.

APPL
2401 Blueridge Avenue, Suite 303
Wheaton, MD 20902
Attn: Membership

APPL is a 501(c)(3) not-for-profit organization. A copy of our current financial statement is available by contacting the APPL office at 301.946.9475 or appl@appl.org. Documents and information submitted to the State of Maryland under the Maryland Charitable Solicitations Act are available from the Office of the Secretary for the cost of copying and postage.