

NATIONAL AND NORTH DAKOTA ELIGIBILITY WORKERS ASSOCIATION

To: _____

Date: _____

Your membership for NEW/NDEWA expires effective _____.

We hope you will renew your membership. The success of this organization depends on you!

Please complete the form below, enclose your dues, and return to the address provided at the bottom.

MEMBERSHIP ALERT: Your renewal form **MUST** be completed and received along with the check by NDEWA by the 15th of the month following the expiration of your current membership. Payment **MUST** reach the National office no later than the last day of the month following the expiration month. Failure to submit the payment timely may cause your membership to be terminated and therefore lose continuous membership.

NATIONAL AND NORTH DAKOTA ELIGIBILITY WORKERS ASSOCIATION

_____/_____/_____ Membership Application/Renewal

PLEASE PRINT:

Date: _____

Name: _____

Street: _____

City: _____

State: _____ Zip: _____

Phone: (_____) _____

Job Title: _____

Is this an address change: Yes No

Please complete agency information on all memberships

Agency: _____

Street: _____

City: _____

State: _____ Zip: _____

Phone: (_____) _____

Email Address: _____

NDEWA Region? Tower Twin JamFar Crew Swim

Designate beneficiary for \$1,000 Life Insurance: _____

Relationship: _____

Address (if different than yours): _____

SEND COMPLETED APPLICATION AND CHECK PAYABLE TO NDEWA TO:

Catherine J. Howery
c/o Renville County Social Services
PO Box 305
Mohall ND 58761-0305

Categories of Employment: (check one)

- Eligibility Work (Technician, etc.)
- Supervision
- Management/Administration
- Education/Training
- Legislative
- Other:

Interest Area: (check one)

- Automated Systems
- Policy
- Supervision
- Training
- Certification
- Administration
- Casework
- Other:

Please check one:

- New Membership
- Renewal Membership

Please check one:

1. Nat'l/State Individual Membership = \$40
2. Nat'l/State Associate Membership = \$40
3. Nat'l/State Institutional/Agency Membership = \$90

*Name of voting delegate: _____