

# Small Nonprofit Organizational Membership Application



Please use this application if you wish to have a Small Nonprofit Organizational Membership. This membership will stay with the organization if you or the designated member should leave the organization. If you would like an Individual Membership, which stays with you should you leave your organization, please refer to the Individual Membership Application.

If you need assistance, please contact AFP's Membership Services Department at (800) 666-FUND.

For more information about AFP, visit [www.afpglobal.org](http://www.afpglobal.org).

## TO COMPLETE THIS SMALL NONPROFIT ORGANIZATIONAL MEMBERSHIP APPLICATION

1. Self-Assess your eligibility for this membership (see box below).
2. The designated member must read the *AFP Code of Ethical Principles and Standards* and complete the signature line at the bottom of this application.
3. Mail completed form and payment (including association and chapter dues) to: Association of Fundraising Professionals, P.O. Box 51, Annapolis Junction, MD 20701
4. Application may be faxed to (240) 396-5602

### SELF-ASSESSMENT FOR A SMALL NONPROFIT ORGANIZATIONAL MEMBERSHIP

1. Does your organization have an operating budget of less than \$2,000,000?  
 YES  NO
2. Does your organization have a fundraising department with fewer than 2 FTE (Full time equivalents)?  YES  NO
3. Is your organization individually incorporated or otherwise organized as a separate entity in the laws of your country?  YES  NO
4. Is your organization **not** affiliated with a larger institution supporting its operations?  YES  NO

If you answered "yes" to all of these questions, your organization qualifies for SMALL NONPROFIT ORGANIZATIONAL MEMBERSHIP.

If you do not qualify, please visit the AFP website ([www.afpglobal.org](http://www.afpglobal.org)) for other categories of membership or call (800) 666-3863.

Please enter name of designated member and address information or staple your business card.

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_

CELL \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

## DUES AND FEES

Small Nonprofit Organizational Membership with AFP is retained by the organization and is transferable within the same organization. In the event of change of employment of the designated member, written or email notification to the AFP International Headquarters is required. All dues are payable on an anniversary year basis. The Small Nonprofit Organizational Membership fee includes both the association fee and a local chapter fee.

1. Small Nonprofit Organizational Membership fee: \$185
2. Determine which chapter you will join (see back of form).  
Chapter code: \_\_\_\_\_
3. Payment method:  Check  Visa  MasterCard  AmEx  Discover

NAME ON CREDIT CARD \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

EXP. DATE \_\_\_\_\_

CARD ID NUMBER (CVV) \_\_\_\_\_

### PLEASE ANSWER THE FOLLOWING QUESTIONS TO HELP US SERVE YOU BETTER:

- Does your organization pay your annual dues?  YES  NO
- Year you joined the fundraising profession \_\_\_\_\_
- Operating budget of Institution \$ \_\_\_\_\_
- The AFP membership list is available to reputable organizations subject to approval by AFP. If you do **not** wish to have your name released to other organizations please check here

I certify that I have read and subscribe to the *AFP Code of Ethical Principles and Standards*. By virtue of signing this application, I accept the obligation to abide by the Code and acknowledge that a violation on my part may result in action by the AFP Ethics Committee. I also certify that I have not been found guilty, pled guilty or no contest, or had an adverse verdict or judgment entered against me in a proceeding in which I had been accused of fraud, misrepresentation, embezzlement, theft, or similar crimes, violations, or injury involving a charity or a donor or prospective donor to a charity. I understand that if there is a local AFP chapter within the vicinity, I must belong to the chapter in addition to belonging to the Association of Fundraising Professionals.

MEMBER SIGNATURE REQUIRED \_\_\_\_\_

DATE \_\_\_\_\_

You will receive services upon payment. Please allow 4–6 weeks for initial receipt of publications. For U.S. income tax purposes, dues are not considered a charitable contribution. If you or your organization is permitted to deduct your dues from gross income under the U.S. Internal Revenue Code, AFP estimates that 3.9% of your dues are not deductible due to AFP's advocacy efforts.