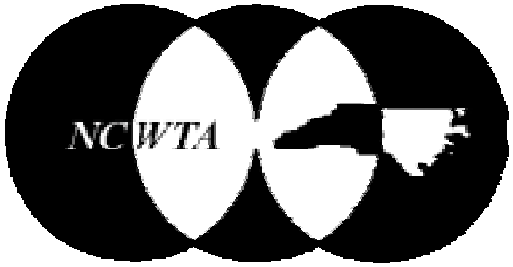

North Carolina World Trade Association
Triangle Chapter
MEMBERSHIP APPLICATION
2005–2006

Please print clearly!

Name _____
First Last

Company _____ Title _____

Department _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone _____ Ext. _____ Fax _____

E-Mail _____

Referred By _____

MEMBERSHIP CATEGORIES AND DUES

Please check the appropriate box below.

Individual ' $ 100

Corporate ' $ 400 (up to four members)

CORPORATE MEMBERSHIPS

Each corporate member must complete and submit a separate membership application form before the corporate membership can be processed.

Key Contact _____

2. _____ 3. _____

4. _____

Membership in NCWTA

Membership dues are billed annually and are valid from June 1 through May 31.

PAYMENT METHOD

Payment must accompany this form.

❑ **Check/Money Order** (Make check payable to NCWTA) **Credit Card**: ❑ Visa ❑ MasterCard ❑ AMEX

Credit Card #: _____ Exp. mm/yy: _____ Billing Zip Code: _____

_____ _____

Cardholder's Signature Print Name as It Appears on Card.

Please Note: Your credit card will reflect a charge from Your Conference Connection, NCWTA's management company.

NCWTA • 3904 Oleander Drive, Suite 101 • Wilmington, NC 28403 • Phone: 910-452-0006 • Fax: 910-452-7834
E-Mail: membership@ncwta.org • Web Site: www.ncwta.org