



# NIRSA Institutional Membership Application

## \*Free Individual Membership With paid Institutional Membership

Once your institutional dues payment has been processed, the **Primary Contact** will receive an email with a coupon to use for your one free individual membership, or provide recipients name on this form.

### Contact Information

Institution \_\_\_\_\_

Primary Contact \_\_\_\_\_

Email for Primary Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Individual to receive free Professional or Student Membership\*

Name \_\_\_\_\_ Member Type:  Professional  Student

### Department Information

Department Name \_\_\_\_\_

Department Website \_\_\_\_\_

Reports To:  
Please check all that apply

- Academics       Athletics       Business/Financial Affairs       Student Affairs       Student Government
- Other \_\_\_\_\_

### Programs Offered

Please check all that apply

- Adaptive & Inclusive       Child Care       Family/Youth       Non-Credit Instructional Courses       Safety Education       Sport Clubs
- Aquatics       Climbing Wall       Fitness       Intramural Sports       Outdoor
- Challenge Course       Faculty/Staff Wellness Programs

### Sport Clubs Offered

Please check all that apply.

- |                                          |                                        |                                               |                                           |                                                        |
|------------------------------------------|----------------------------------------|-----------------------------------------------|-------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Adaptive Sports | <input type="checkbox"/> Crew          | <input type="checkbox"/> Handball             | <input type="checkbox"/> Racquetball      | <input type="checkbox"/> Table Tennis                  |
| <input type="checkbox"/> Aquatics        | <input type="checkbox"/> Curling       | <input type="checkbox"/> Ice Hockey           | <input type="checkbox"/> Rugby            | <input type="checkbox"/> Ultimate Disc                 |
| <input type="checkbox"/> Archery         | <input type="checkbox"/> Cycling       | <input type="checkbox"/> Lacrosse             | <input type="checkbox"/> Running          | <input type="checkbox"/> Volleyball                    |
| <input type="checkbox"/> Badminton       | <input type="checkbox"/> Dance         | <input type="checkbox"/> Martial Arts: Judo   | <input type="checkbox"/> Sailing          | <input type="checkbox"/> Water Polo                    |
| <input type="checkbox"/> Baseball        | <input type="checkbox"/> Dodgeball     | <input type="checkbox"/> Martial Arts: Karate | <input type="checkbox"/> Shooting Sports  | <input type="checkbox"/> Wrestling                     |
| <input type="checkbox"/> Bass Fishing    | <input type="checkbox"/> Equestrian    | <input type="checkbox"/> Martial Arts: Other  | <input type="checkbox"/> Ski/Snowboarding | <input type="checkbox"/> Water Skiing/<br>Wakeboarding |
| <input type="checkbox"/> Basketball      | <input type="checkbox"/> Fencing       | <input type="checkbox"/> Mountain Biking      | <input type="checkbox"/> Soccer           | <input type="checkbox"/> Other _____                   |
| <input type="checkbox"/> Bowling         | <input type="checkbox"/> Field Hockey  | <input type="checkbox"/> Paintball            | <input type="checkbox"/> Softball         |                                                        |
| <input type="checkbox"/> Boxing          | <input type="checkbox"/> Flag Football | <input type="checkbox"/> Polo                 | <input type="checkbox"/> Squash           |                                                        |
| <input type="checkbox"/> Cheerleading    | <input type="checkbox"/> Golf          | <input type="checkbox"/> Power Lifting        | <input type="checkbox"/> Tennis           |                                                        |
| <input type="checkbox"/> Cricket         | <input type="checkbox"/> Gymnastics    | <input type="checkbox"/> Quiddich             | <input type="checkbox"/> Triathlon        |                                                        |

Please visit [www.nirsa.org](http://www.nirsa.org) to update your full institutional profile & roster!

# NIRSA Institutional Membership Application

## Dues Rates Table

Rates effective between July 1, 2015 and June 30, 2016

Community served*	1 year	2 years SAVE 5%	3 years SAVE 10%
<b>Four-year Colleges &amp; Universities</b>			
1-1,000	\$476	\$905	\$1,286
1,001-2,500	\$581	\$1,103	\$1,568
2,501-5,000	\$686	\$1,303	\$1,852
5,001-10,000	\$849	\$1,613	\$2,292
10,001-15,000	\$1,005	\$1,910	\$2,715
15,001-20,000	\$1,162	\$2,208	\$3,138
20,001-25,000	\$1,371	\$2,606	\$3,703
25,001-30,000	\$1,437	\$2,730	\$3,879
30,001-35,000	\$1,666	\$3,165	\$4,498
35,001 +	\$1,730	\$3,287	\$4,671

<b>Two-year Colleges</b>			
1-1,000	\$320	\$608	\$864
1,001-2,500	\$392	\$744	\$1,058
2,501-5,000	\$464	\$881	\$1,252
5,001-10,000	\$569	\$1,081	\$1,537
10,001-15,000	\$679	\$1,290	\$1,834
15,001-20,000	\$777	\$1,476	\$2,097
20,001-30,000	\$882	\$1,676	\$2,382
30,001 +	\$993	\$1,888	\$2,682

<b>Military, Parks &amp; Recreation</b>			
1-2,500	\$359	\$683	\$970
2,501-10,000	\$392	\$744	\$1,058
10,001-20,000	\$424	\$806	\$1,146
20,001-30,000	\$489	\$930	\$1,321
30,001 +	\$556	\$1,056	\$1,500

\*Community served is the total of all individuals (students, faculty, staff, alumni, etc.) eligible to use recreation facilities/programs offered by the institution

## Membership Dues | See Dues Rates Table

Number of Community Served\*

- Four-year College/ University
- Two-year College
- Correctional Facility
- Military
- Parks & Recreation

- YWCA / YMCA / JCC
- Other

I would like to receive a paper certificate for my NIRSA Institutional Membership

## Payment Information

TOTAL

\$

- Check enclosed (make checks payable to NIRSA; U.S. funds only)
- Visa
- MasterCard
- Discover
- American Express

Credit Card Number \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

## Thank you!

Please submit this form to NIRSA today!

### NIRSA Headquarters

4185 SW Research Way  
Corvallis, OR 97333-1067

tel: 541-766-8211      email: [billing@nirsa.org](mailto:billing@nirsa.org)  
fax: 541-766-8284      web: [www.nirsa.org](http://www.nirsa.org)