

# MEMBERSHIP INFORMATION VERIFICATION FORM

**Please complete this form to ensure we have the correct information for your company.**

Company Name: \_\_\_\_\_ Industry: \_\_\_\_\_

Construction  Healthcare  Manufacturing  Mining - Sand & Gravel  Mining - Surface Coal  Oil & Gas  Transportation  Utilities  Other

Number of Employees:  0-10 \$175  11-49 \$225  50-100 \$250  
*If the amount indicated here does not match your invoice, please adjust your payment accordingly.*  101-199 \$300  >200 \$350  Government/School \$175  
 Associate \$100 (Secondary membership for multiple locations)

Main Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

*When you provide your email, you will receive communications from the NDSC regarding pertinent safety issues, courses and news. Your email address will not be sold or distributed to any third parties.*

Please list any additional employees you would like to receive email correspondence from the NDSC:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

## ASSOCIATE MEMBER INFORMATION

*This section is for those purchasing an additional Associate membership.*

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Please email, mail or fax this form to the NDSC. You may also find an electronic form by logging on to the NDSC Members Only Area at [www.ndsc.org/memberarea](http://www.ndsc.org/memberarea).

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