

## MEMBERSHIP APPLICATION

### COMPANY INFORMATION

Company Name:

DBA (if applicable):

Industry:

Physical Address:

City:

State:

ZIP Code:

Mailing Address (if different):

City:

State:

ZIP Code:

### COMPANY CONTACTS

*Please list those individuals who are authorized to contact NAE on behalf of your organization.*

Full Name:

Title:

Email Address:

Phone Number (w/ ext.):

Full Name:

Title:

Email Address:

Phone Number (w/ ext.):

Full Name:

Title:

Email Address:

Phone Number (w/ ext.):

### MEMBERSHIP DUES

Membership dues are **\$70.00 per month** (base monthly fee) plus **\$0.70 per Nevada employee per month**. The maximum monthly dues for any organization will not exceed \$225.

No. of Nevada Employees

x \$0.70 per Employee per month

\$

Monthly Membership Dues

\$

70.00

**Total Monthly Dues**

\$

**Total Annual Dues** (Total Monthly Dues x 12 Months)

\$

New members must pay the first year's dues in full. After the first year of membership, members may choose one of the following billing options: ☐ Quarterly ☐ Semi-Annually ☐ Annually

### WHICH NAE SERVICES & PRODUCTS INTEREST YOU?

*NAE offers a variety of business and HR services and products to its members. So NAE knows how to better serve you, please let us know which of these products and/or services interest you. **Check all that apply.***

☐ HR Consultation/Advice

☐ Pay and Benefits Survey

☐ Employee Handbook Review

☐ Employee Opinion Surveys

☐ Training Courses and Events

☐ Required State & Federal Posters

☐ Sample Policies, Procedures, and Job Descriptions

☐ Unemployment Insurance Administration

☐ Notary Services

☐ Legislative Advocacy

☐ Other:

#### HOW DID YOU HEAR ABOUT NAE?

☐ NAE Website / Social Media      ☐ Email / Direct Mail Communication      ☐ Networking / Event

☐ Referral from NAE Member (please specify):

☐ NAE Staff Member (please specify):

☐ Other (please specify):

#### TERMS & CONDITIONS OF NAE MEMBERSHIP

Company hereby makes application for membership in the Nevada Association of Employers, Inc. ("NAE"). This application and the due payable herewith shall be effective immediately, subject however, to the approval of the Board of Directors of NAE. It is agreed that NAE may reject this application by refund of the monies tendered herewith.

Membership in NAE is terminable by members only after one (1) year and upon notice as provided in the by-laws, and membership may be terminated at any time by the Board of Directors of NAE upon notice as provided in the by-laws; provided, further, that where a collective bargaining agreement has been entered into by NAE on behalf of Company, membership shall continue and be maintained for the duration of such collective bargaining agreement.

Membership in NAE does not incur any liability for the debts of NAE, except that Company understands and accepts liability for all dues and reimbursements for expenses and costs that may be owed at the time of termination of membership.

Company agrees, if this application is accepted, to comply with the by-laws of NAE (a copy of which is available upon request). For federal income tax purposes, membership dues to NAE are deductible as business expenses, not charitable contributions. As required by PL103-66, a portion of dues is not deductible as a business expense to the extent NAE engages in lobbying. Therefore, it is estimated that 2% of dues paid during NAE's fiscal year (October 1 – September 30) cannot be deducted.

#### SIGNATURES

Company has read and understands the terms and conditions of NAE membership. By signing below, Company agrees to comply with the by-laws of NAE and further agrees to pay all dues in advance of receiving any benefits of membership.

Company Signature:

Date:

Name (please print):

Title:

NAE Signature:

Date:

Name (please print):

Title:

#### TO BE COMPLETED BY NAE

Effective Date:

Amount Enclosed: