

NLIHC Membership Form



MEMBERSHIP INFORMATION

- ☐ New Membership ☐ Membership Renewal

MEMBER TYPE

SUGGESTED DUES AMOUNT

- | | |
|--|------------|
| ☐ Low income individual or student | \$5.00 |
| ☐ Individual | \$110.00 |
| ☐ Resident/Tenant Association or Student Organization | \$15.00 |
| ☐ Organization, <\$250,000 operating budget | \$225.00 |
| ☐ Organization, \$250K – \$499,999 | \$375.00 |
| ☐ Organization, \$500K – \$999,999 | \$550.00 |
| ☐ Organization, \$1,000,000 – \$2,000,000 | \$1,100.00 |
| ☐ Organization, \$2,000,000 – \$5,000,000 | \$2,200.00 |
| ☐ Organization, > \$5,000,000 | \$3,000.00 |
| ☐ Other Amount | \$ _____ |

Memo to Members & Partners

NLIHC members can receive our weekly *Memo to Members & Partners* newsletter, which features the most up-to-date housing information and news! Please fill out the opposite side of this form or provide a separate list of additional contacts at your organization who should receive *Memo* and other NLIHC messages. Please specify how you would like to receive *Memo*:

- ☐ Please send me *Memo to Members & Partners* by email
☐ I do not have an email address, please send me *Memo to Members & Partners* via mail
☐ I do not wish to receive *Memo to Members & Partners*

Advocates' Guide

If you are joining NLIHC for the first time, would you like us to send you NLIHC's *Advocates' Guide* free of charge? The *Advocates' Guide* is a comprehensive resource providing information on housing and community development programs, and other vital tools for advocates. The full *Advocates' Guide* is also available online at <https://tinyurl.com/ybz66p6l>

- ☐ Yes, please mail me an *Advocates' Guide* ☐ No thank you

Did someone refer you for NLIHC Membership?

Name: _____ or Organization Name: _____

CONTACT INFORMATION

- ☐ Mr. ☐ Ms. ☐ Other: _____

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____ Twitter: @ _____

PAYMENT INFORMATION

- ☐ Check Enclosed ☐ Money Order Enclosed

Thank you for supporting the National Low Income Housing Coalition through your membership!

NLIHC is a membership-based organization open to individuals, organizations, corporations, and government agencies. Achieving our mission will only be possible through the work and dedication of advocates like you, and the financial contributions of our members to NLIHC is crucial to making our work possible.

If you have any questions regarding NLIHC membership, please email outreach@nlihc.org, or call 202-662-1530 and ask to speak with the Field Team member for your state.

NLIHC is a membership organization open to individuals, organizations, corporations, and government agencies. **EVERY MEMBERSHIP MAKES A DIFFERENCE.**

BENEFITS OF MEMBERSHIP

Memo to Members & Partners:

Receive the nation's most respected housing policy newsletter in your email inbox—or your mailbox—every week.

Calls to Action: Members receive email notification of significant policy developments warranting constituent calls or letters to Congress.

Discounted Forum Registration:

NLIHC hosts an annual policy forum and leadership reception in Washington, DC, which members can attend at a discounted rate. The forum brings together advocates, researchers, academics, government experts, organizers, and individuals to share expertise and insights on the latest federal housing policy initiatives.

Discounted Publications: NLIHC produces numerous publications each year, including the *Advocates' Guide* and *Out of Reach*. Members can order print copies at a discounted rate.

Join online at
nlihc.org/membership

Questions?

Call 202-662-1530 or
e-mail outreach@nlihc.org



NATIONAL LOW INCOME
HOUSING COALITION

DO YOU KNOW FRIENDS OR COLLEAGUES WHO SHOULD BE A MEMBER OF NLIHC?

Let us know and we'll send them free membership materials.

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____

DOES YOUR ORGANIZATION HAVE ADDITIONAL CONTACTS WHO SHOULD RECEIVE NLIHC MESSAGES?

Please fill out the address if it does not match that of the primary contact.

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____

Name: _____	Name: _____
Organization: _____	Organization: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____	Telephone: _____ Email: _____