



North Carolina Sustainable Energy Association

Education - Public Policy - Economic Development

P.O. Box 6465
Raleigh, NC 27628
(919) 832-7601

www.ncsustainableenergy.org

NCSEA

Membership Form

Please complete and return with a check payable to NCSEA or credit card information to the above address.

Name(s): _____

Address: _____

City, State, Zip: _____

Home Phone: () _____

Email Address(es): _____

Please choose from the following membership levels (each for individual or family):

- ___ \$2000 – Sustainer’s Circle (Lifetime Membership)
- ___ \$1000 – Guardian
- ___ \$500 – Benefactor
- ___ \$250 – Patron
- ___ \$100 – Friend
- ___ \$50 – Affiliate
- ___ \$25 – Regular
- ___ \$5 – Student

Please let us know if you would like to volunteer in any of the following areas:

- ___ I can help in NCSEA's Raleigh office.
- ___ I will make phone calls from home to let other members know about NCSEA functions.
- ___ I can help with the upcoming statewide Green Building and Solar Tour (Fall 2007).
- ___ I can help NCSEA at the Southern Homes Show in Raleigh (Fall 2007).
- ___ I can help find new members.
- ___ I will host a house party/fundraiser for NCSEA.

Members of NCSEA have the benefit of joining the American Solar Energy Society (ASES), our parent organization, or receiving their publication, at a reduced rate. If you are interested, please check the appropriate box below and add the pertaining amount to your total below.

- ___ \$34 – ASES Basic membership
- ___ \$79 – ASES Professional membership
- ___ \$29 – Solar Today (Free for ASES members) – Bi-monthly magazine of ASES

For more information regarding ASES, including other membership levels, go to www.ases.org

Additional Donation: \$ _____

Total Payment: \$ _____	Date: _____	FOR OFFICE USE ONLY
<input type="checkbox"/> Enclosed is my check made payable to NCSEA.		Access: _____
<input type="checkbox"/> Please charge the total above amount to my Mastercard/Visa.		QB: _____
<input type="checkbox"/> Please charge \$ _____ to my Mastercard/Visa each month. (**new feature**)		
Card # _____		Exp. Date _____
Address (if different from above) _____		
Print Name _____		Signature _____

*All contributions are tax-deductible to the fullest extent of the law.