

If you have any questions, please call a Member Services Representative at +1-262-789-1880

2011 International Membership Dues Application

(Not for Canadian members)

"It is understood and agreed that membership in NFDA is conditioned upon adherence to the NFDA Constitution, Bylaws and Code of Professional Conduct. Violations of any of these may result in disciplinary measures imposed by NFDA including, but not limited to, expulsion from membership."

Dues expire 31/12/11.



13625 Bishop's Drive • Brookfield, Wisconsin 53005-6607
 Phone: +1-262-789-1880
 Fax: +1-262-789-6977

Step 1

MEMBER NAME: _____

List funeral home if company membership.

List funeral director name if individual membership.

Funeral Home: _____
(main location)

Mailing Address: _____
 City/State/Postal Code: _____
 Country _____
 Street Address: _____
 City/State/Postal Code: _____
 Country _____
 Telephone: _____
 Cell #: _____ Include Country Code
 Fax: _____
 Check if fax line only

Individual Email: _____
 Website: _____

Step 2 Company Membership *(includes all locations & all funeral directors)

1. Company Membership		
Dues based on # of families you served last year		\$
Tier 1 (0-75)		\$328.00
Tier 2 (76-150)		\$380.00
Tier 3 (151-350)		\$516.00
Tier 4 (351-500)		\$620.00
Tier 5 (501-1,000)		\$916.00
Tier 6 (1,001+)		\$1,140.00
OR Individual Membership		
Individual Funeral Director		\$305
Student in Funeral Service School/Program		\$65
2. Additional Director Subscriptions		
\$60 x _____	= \$ _____	
(# of subscriptions in excess of 5 members)		
3. Total 2011 Dues		
	= \$ _____	

(Please see back of the form to list additional locations.)

Step 3 (List funeral directors/embalmers at main location only in step 3. List licensees at additional locations in step 4.)

Funeral Director #1
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
(included with membership)

Funeral Director #2
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
(included with membership)

Funeral Director #3
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
(included with membership)

Funeral Director #4
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
(included with membership)

Funeral Director #5
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
(included with membership)

Funeral Director #6
Circle
 Name: MR/MS _____
 License #(if applicable) _____
 Telephone: _____
 Cell #: _____
 E-mail: _____
 Director Subscription (Check if yes)
 \$60

*See back for the benefits of company vs. individual membership

Step 4

Additional Locations (Included in the price of the membership) If you have more than 2 additional locations please attach a copy to this page.

Funeral Home: _____
Mailing address: _____
City/State/Postal Code: _____
Street address: _____
City/State/Postal Code: _____
Country: _____
Telephone: _____
Fax: _____
Website: _____
Funeral Director _____
E-mail: _____
Cell #: _____
Director Subscription check if yes
Funeral Director _____
E-mail: _____
Cell #: _____
Director Subscription check if yes

Funeral Home: _____
Mailing address: _____
City/State/Postal Code: _____
Street address: _____
City/State/Postal Code: _____
Country: _____
Telephone: _____
Fax: _____
Website: _____
Funeral Director _____
E-mail: _____
Cell #: _____
Director Subscription check if yes
Funeral Director _____
E-mail: _____
Cell #: _____
Director Subscription check if yes

Method of Payment

Check (U.S. dollars drawn on U.S. Bank)
Checks must be made payable to NFDA, 13625 Bishop's Drive, Brookfield, Wisconsin 53005-6607 USA

To complete a wire transfer please contact NFDA at +1-262-789-1880

Charge to: **Mastercard** **Discover**
 Visa **American Express**

Card Number: _____ Exp. Date: _____

Name on Card: _____ Signature: _____

Company benefits include:

1. All of your locations will become members
2. All of the funeral directors and embalmers at your company will become members and receive a membership card
3. Five of the funeral directors at your company will receive a complimentary copy of The Director magazine, additional funeral directors may receive the subscription for \$60 each
4. Your company, including your website will be listed in the Online Directory of Members viewed by consumers and other members
5. Your company may use the NFDA logo in your materials to show that you're a proud NFDA member
6. Your company may request free ads and community relations materials
7. Your company is welcome to participate in the Pursuit of Excellence program
8. Your company is welcome to achieve the Green Funeral Practices™ certificate
9. All of your funeral directors may attend the NFDA convention and other conferences at member rates (huge savings!)
10. Savings on products offered through our catalog or on the website
11. Access to the member page of www.nfda.org for all of your funeral directors
12. Your funeral home will receive a certificate of membership that you may proudly display
13. Member discounts to online NFDA Funeral Career Center
14. All of your funeral directors who have an email address will receive two electronic newsletters
15. Unlimited access to NFDA staff to assist you (+1-262-789-1880)

Individual benefits include: (If you are not with a funeral home)

1. Individual funeral director becomes a member and receives a membership card
2. Receive one copy of The Director magazine
3. Attendance at NFDA convention and other conferences at member rates
4. Savings on products offered through our catalog or on the website
5. Access to the member page of www.nfda.org
6. Member discounts to online NFDA Funeral Career Center
7. Receive two electronic newsletters to your email address
8. Unlimited access to NFDA staff to assist you (+1-262-789-1880)