



NTA MEMBERSHIP APPLICATION – 2012

Please enroll me as a member of the Nebraska Turfgrass Association:

Sustaining Member @ \$250.00	\$ _____
Organization Member @ \$150.00	\$ _____
Individual Member @ \$50.00	\$ _____
Student Member @ \$25.00 (Tech or University Student Only)	\$ _____
Total Remittance	\$ _____

The NTA newsletter, event information and updates are provided to members by e-mail so please be sure to include your e-mail address. For our records, please complete the following and circle one for preferred mailing address.

_____ Do **NOT** post my information on the NTA website.

Business Name & Address

Business Name: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Cell phone: _____

Website: _____

Individual Name & Address

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Cell phone: _____

Check Enclosed _____ Credit Card _____

Name on card: _____ Card number: _____

Expiration Date: _____ Total to be charged: _____

Billing Address: _____

City/State/Zip: _____

Phone number: _____

Signature: _____

Please send to:
Nebraska Turfgrass Association
301 S. 13th St., Ste. 400
Lincoln, NE 68508

Make checks payable to: Nebraska Turfgrass Association

Fax: 402-476-6167

E-Mail: kdolezal@kisseles.com