



THE NATIONAL FLUTE ASSOCIATION, INC.

Gift Membership

The recipient's membership will be in effect for 365 days

STEP 1 – NAME/ADDRESS OF GIFT GIVER

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone _____ E-Mail _____

STEP 2 – NAME/ADDRESS OF RECIPIENT

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone _____ E-Mail _____

STEP 3 – MEMBERSHIP LEVEL

		Total
Active USA	\$80	\$ _____
Student USA*	\$50	\$ _____
Life	\$2,500	\$ _____

* Full-time students only. Institution name: _____

☐ I attest that the recipient is a full-time student at the above-named institution.

STEP 4 – MAKE A DONATION

Contributions are tax-deductible to the extent provided by law. ____ \$5 ____ \$10 ____ \$25 ____ \$50 ____ Other \$ _____

Donations are applied to the Annual Fund/General Operating Account unless otherwise indicated here: _____

This donation is:

- ☐ in honor of _____
- ☐ in memory of _____

STEP 5 – PAYMENT

☐ MasterCard ☐ Visa ☐ Discover ☐ Check Enclosed Payable to: The National Flute Association **TOTAL \$** _____

Card Number _____ Expiration Date _____

Card Holder Name _____ Security Code _____

Billing Address (if different from above) _____

Signature _____

Your signature signifies acknowledgement and acceptance of the NFA refund policy, as well as agreement to payment as stated above.

Refund policy: NFA membership dues are not refundable

Submit completed form (including signature) and payment to:

National Flute Association
70 East Lake Street, Suite 200
Chicago, IL 60601
Phone: (312) 332-6682 | Fax (312) 332-6684
Imauti@nfaonline.org | www.nfaonline.org

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