

NIBIC 2009 MEMBERSHIP DUES & DIRECTORY UPDATE

(Dues are due in January of each year. Please print clearly or type)

NAME: _____
(As you wish it to appear in the Directory)

Mailing Address: _____

Ministry Position: _____

Ministry Organization: _____

Telephones: Work: () _____
Home: () _____
Cell: () _____
Fax: () _____

E-Mail: _____
Web: _____

Chaplaincy Endorsing Faith Body: _____
(Please attach copy of current endorsement verification)

Membership Category in NIBIC (and dues owed):

Certified: _____ (\$75) Associate: _____ (\$50) Organizational: _____ (\$100)
Clinical: _____ (\$75) Lay Affiliate: _____ (\$50) Retired Member: _____ (\$50)
Professional: _____ (\$75) Student: _____ (\$30)

Please make check payable to NIBIC and mail with this page to:

The Worklife Institute - NIBIC
1900 St. James Place, Suite 880
Houston, TX 77056

NEWS FOR THE NEWSLETTER THAT YOU WOULD LIKE TO SHARE: (Current activities, interests, conferences, training you recommend, ideas and opinions, etc.)