



APPLICATION FOR AFFILIATION WITH THE NATIONAL STAFF ORGANIZATION

In accordance with a majority vote of its general membership taken on

_____ the
(Date)

Name of Association _____

Address _____
(Number) (Street)

(City) (County) (State) (Zip)

hereby makes application to be recognized as an affiliate of the National Staff Organization and agrees to adhere to the appropriate Standards for Affiliation with the National Staff Organization.

The Association shall forward this application to NSO with:

- A copy of its current Constitution and Bylaws
- A copy of its Certificate of Incorporation
- An application for tax exemption
- An application for bonding

The Association agrees to forward its membership dues to the NSO within the time limits as specified within the Standards for Affiliation with the National Staff Organization.

Date: _____

(Signature of President)

(Signature of Secretary)

Please return to: **Chuck Agerstrand, President, National Staff Organization**
c/o 1216 Kendale Blvd., PO Box 2573
East Lansing, Michigan 48826-2573