



## Membership Application

Name of organization, business, or individual:

Contact person or persons:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

Type of membership applying for: (circle one)      Class A      Class B      Non-Voting Member  
Dues: Class A, Voting, \$500.00      Class B, Voting, \$250.00      Nonvoting, \$50.00

---

If a business: Please describe the services provided and include a statement regarding your interest in the ND Alliance for Renewable Energy.

If an organization: Please state the mission of the organization and include a statement regarding your interest in the ND Alliance for Renewable Energy.

If an individual: Please include a statement regarding your interest in the ND Alliance for Renewable Energy.

Services:

Mission of Organization:

Statement of Interest:

---

**Please send your completed membership application and payment to:**

ND Alliance for Renewable Energy (NDARE)  
4265 45<sup>th</sup> St S Ste 111-27  
Fargo, ND 58104

For more information on NDARE, log on to [www.ndare.org](http://www.ndare.org).