



NEVADA RURAL WATER ASSOCIATION

MEMBERSHIP APPLICATION

System/Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

Physical Address (if different): _____

City: _____ State: _____ Zip: _____ County: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____ Website: _____

System Operators: _____

Primary Business/Service: _____

Membership Dues

Please check appropriate section

	<u>Number of Connections</u>	<u>Rates</u>
_____	1-50	\$110.00
_____	51-9,999	\$225.00
_____	Support Membership – population >10,000	\$235.00
_____	Associate Membership	\$220.00
_____	Individual Membership (not available to companies)	\$55.00
_____	Donation to Water PAC (National Rural Water lobbying efforts)	\$_____

**NOTE: Your dues and/or donations may or may not be tax deductible.
Please contact your tax advisor.**

TOTAL DUE: \$_____

Please mail or fax this application and payment to:

NEVADA RURAL WATER ASSOCIATION
363 FAIRVIEW DRIVE
CARSON CITY, NV 89701
P: (775) 841-4222
F: (775) 841-4243

NvRWA is an equal opportunity employer and provider

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

Applicant: <input type="checkbox"/> I do not wish to furnish this information	Co-Applicant: <input type="checkbox"/> I do not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male