

Sustaining Member Application

School Nutrition Association of North Carolina

2318 N. Elm Street, Greensboro, NC 27408

Phone: 800-219-4893

E-mail: jbdfroth@aol.com

www.schoolnutrition-nc.org

Federal Tax ID Number: 56-6066302

Corporate Membership	\$400
Up to Four (4) Members per Company	

Individual Membership	\$200
One (1) Member per Company	

Contact Information

Company Name: _____

Main Contact's Name: _____ Title: _____

(This person will receive all mailings.)

Address: _____

City/State/Zip Code: _____

Business Phone: _____ Fax: _____

E-Mail: _____ Cell Phone: _____

Additional Members for Corporate Membership

Member's Name: _____ Title: _____

Address: _____

City/State/Zip Code: _____

Business Phone: _____ Fax: _____

E-Mail: _____ Cell Phone: _____

Member's Name: _____ Title: _____

Address: _____

City/State/Zip Code: _____

Business Phone: _____ Fax: _____

E-Mail: _____ Cell Phone: _____

Member's Name: _____ Title: _____

Address: _____

City/State/Zip Code: _____

Business Phone: _____ Fax: _____

E-Mail: _____ Cell Phone: _____

Payment Information

Payment Method: Check Enclosed MasterCard Visa AMEX Total Amount: \$ _____

Make check payable to SNA-NC.

Card Number: _____ Expiration Date: _____

Cardholder's Name: _____ Security Code: _____

Authorized Signature: _____ Date: _____

Mailing Address for Credit Card Statement: _____

(If different from above address) _____

Email Address for Receipt: _____