

# NIBIC 2010 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:	_____ (\$65)	Associate:	_____ (\$50)	Organizational:	_____ (\$100)
Clinical:	_____ (\$65)	Lay Affiliate:	_____ (\$50)	Retired Member:	_____ (\$50)
Professional:	_____ (\$65)	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

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