



Membership Application

Louisiana Recreation and Park Association

Contact Information

Name: _____ Title: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Website: _____

Membership Type & Dues

Membership Type	Dues / Calendar Year	Select
INDIVIDUAL MEMBERSHIPS		
Commercial (company & up to 2 representatives)	\$200.00	<input type="checkbox"/>
Affiliate	\$200.00	<input type="checkbox"/>
Student / Retiree Full-time grad or undergrad student with min. 12 credits in the Park/Rec field; must be associated with an affiliate membership.	Free	<input type="checkbox"/>
Part-Time / Graduate / Intern	\$50.00	<input type="checkbox"/>
Professional (if no agency affiliation)	\$75.00	<input type="checkbox"/>
AGENCY MEMBERSHIPS		
Up to 5 Members	\$325.00	<input type="checkbox"/>
Up to 10 Members	\$600.00	<input type="checkbox"/>
Up to 20 Members	\$1,000.00	<input type="checkbox"/>
Up to 40 Members	\$1,500.00	<input type="checkbox"/>
41+ Members	\$1,750.00	<input type="checkbox"/>

Amount Submitted:

***Note:** Please fill out this application with the correct contact information and attach an updated roster with **all employees** to be covered under your agency membership.



Organization Roster

Louisiana Recreation and Park Association

List all employees to be covered under your agency membership. Attach additional pages if needed.

Full Name	Title / Position	Email Address	Phone Number
1			
2			
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