

Select membership type: Community Development Credit Union dues amount _____
 Community Development Partner dues amount _____
 Community Development Supporter dues amount _____
other amount _____

Full Name of CU _____
Charter # _____ Year Chartered _____
Website address: *http://* _____

Mailing Address

Address _____
City _____ State _____ Zip _____
Main Telephone _____ Fax _____

Street Address (if different than mailing address)

Address _____
City _____ State _____ Zip _____

Name of CU Manager/CEO _____
Telephone _____ ext # _____ Email _____

Primary contact for Inclusiv Communications? yes no

Name of Board Chair _____
Address _____
City _____ State _____ Zip _____
Telephone _____ ext # _____ Email _____

Primary contact for Inclusiv Communications? yes no

Contact Person (if different from above)

Name _____ Title _____
Address _____
City _____ State _____ Zip _____
Telephone _____ ext # _____ Email _____

Primary contact for Inclusiv Communications? yes no

How do you prefer to receive communications?
 email fax regular mail

**Please detach this page
and send completed form to:**

Inclusiv
Attn: Member Services
39 Broadway, Suite 2140
New York, NY 10006-3063
212 809 1850
www.inclusiv.org



Please indicate your field of membership type:

- Associational
- employment based
- community
- multiple fields
- open

How did you hear of the Federation?

- another CU
 - State League
 - NCUA or state examiner
 - mailing from us
 - meeting or conference
 - Publication
 - other (*please explain*)
-

Member Dues Schedule

Dues are based on a credit union's assets as of the close of the prior calendar year.

Community Development Credit Unions

Membership year is July 1 - June 30

For Credit Unions with assets of:	Your Dues are:
\$0 - \$1,999,999	\$200
\$2,000,000 - \$4,999,999	\$550
\$5,000,000 - \$9,999,999	\$1,250
\$10,000,000 - \$19,999,999	\$2,500
\$20,000,000 - \$49,999,999	\$3,850
\$50,000,000 - \$149,999,999	\$4,500
\$150,000,000 - \$499,999,999	\$5,000
\$500,000,000+	\$5,500

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Questions or Comments?

Contact Pablo DeFilippi, Senior Vice President of Membership & Network Engagement at 800 437 8711 ext 304 or write to pablo@inclusiv.org

For more information visit our web site www.inclusiv.org.

Thank you for your interest in the Inclusiv Credit Union Network.