



NEXT Young Professionals Membership Application

APPLICANT INFORMATION (Please type)

Name:					
Phone:		Email:			
Current address:					
City:		State:		ZIP Code:	
Current employer:					

SPOUSE/GUEST INFORMATION

Name:					
Phone:		Email:			
Current employer:					

SIGNATURE

Signature of applicant:		Date:
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Please Indicate Annual Membership Investment: Platinum Sponsor: \$1,500.00 Corporate Sponsor: \$600.00
 Business Sponsor: \$200.00 Individual Membership: \$75.00 Additional Member (current) \$50

Payment Options: Bill Me Bill Employer Check is Enclosed (payable to NEXT)

Payment Mailing Address: NEXT Young Professionals, C/O Scottsbluff/Gering United Chamber of Commerce, 1517
Broadway Suite 104, Scottsbluff, NE 69361.