



**2017 Annual Dues Statement  
for  
Associate Membership**

**Remit to: NLA  
PO Box 80771  
Lincoln, NE 68501-0771**

**Total Amount Due: \$125.00**

**Company Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Company Website:** \_\_\_\_\_

Would you like your company website linked to NLA website? Yes \_\_\_ No \_\_\_

([www.nebraskalakes.org](http://www.nebraskalakes.org))

We are interested in **display space at the Spring Management Conference, April 23, 2017.**  
Please contact us with details.

I / We consent and authorize Nebraska Lake Association to maintain the above information for publication and distribution in their annual membership directory, website database, or like information source and hold the Nebraska Lake Association harmless from the publication and/or distribution of said information as authorized herein. If at any time I desire to revoke this authorization, I must do so in writing to the office of the Association more than 90 days prior to any planned publication.

Date \_\_\_\_\_

Authorized Representative(s) \_\_\_\_\_

**Brief Description of Services:** \_\_\_\_\_

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