



**MEMBERSHIP APPLICATION FOR THE  
NORTHERN NJ NIGP – CHAPTER 7**

I wish to apply for membership in the Northern New Jersey Chapter of the National Institute of Governmental Purchasing, and if accepted agree to support the objectives of the Chapter and abide by the NIGP Code of Ethics.

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Please check certifications and registrations you currently hold:

QPA \_\_\_ CPPO \_\_\_ CPPB \_\_\_ CPM \_\_\_ CPP \_\_\_ RPPO \_\_\_ RPPS \_\_\_

Are you a member of the National Association? Yes \_\_\_ No \_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Annual Dues are \$80.00

Make check payable to:  
**Northern NJ Chapter of NIGP**

Remit to: Northern NJ Chapter of NIGP  
Jane Foti  
County of Somerset  
PO Box 3000  
Somerville, NJ 08876  
e-mail: treasurer@nnjnigp.org