



**Submit Membership Application to:**  
9916 Carver Rd., Suite 100 Cincinnati, OH 45242

**Member Services:**

Phone (513) 281-3888 Fax (513) 281-1765 NASC@SportsCommissions.org

## About The NASC

The National Association of Sports Commissions (NASC) is the sports event industry's leading networking organization. Founded in 1992, the NASC represents nearly 500 organizations, including 350 cities across the United States, Canada, and Puerto Rico. The NASC provides education, networking, and professional development to the sports event industry.

## Categories of Membership

**Active**

An organization located in a given city, metropolitan area or urban unit, region, state, nation, commonwealth, territory, or other political subdivision (each, for purposes of the Association's Articles of Incorporation and these Bylaws, a "community") which solicits and services sports events, sports organizations, and sports facilities and other types of sports-related activities in that community. **(\$700 per calendar year)**

**Allied**

Organizations, to include multi-sports organizations, colleges and universities and the like and persons or firms providing equipment, services, or attractions to the field served by Association (i.e., sports marketing companies, consulting and/or architectural firms, sports equipment manufacturers, facility management or food service companies, conferences, leagues, and similar organizations). **(\$700 per calendar year)**

**Rights Holder**

Organizations, firms or persons which hold rights to events and activities within the purposes and field of activity of the Association. **(\$100 per calendar year)**

**A Special Note About Dues Payments:**

The NASC membership year runs in conjunction with the calendar year (January – December). When an organization first joins the NASC, dues are to be paid in full. Upon the first of January the following year, the organization will receive a pro-rated dues invoice from the NASC office in accordance with their date of joining. At the start of the third year of membership, and continuing forward, the organization will receive an invoice for the full dues amount. If you have any questions regarding this policy, contact the NASC office at (513) 281-3888 or [nasc@sportscommissions.org](mailto:nasc@sportscommissions.org).

## Organization Information

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Organization Web Site \_\_\_\_\_

Mission Statement (Attach additional sheet if necessary.) \_\_\_\_\_

Organization Description (Please describe the services your organization provides in 100 words or less. Attach additional sheet if necessary.) \_\_\_\_\_

## ORGANIZATION DEMOGRAPHICS

**Organization Type** (check all that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Sports Commission               | <input type="checkbox"/> Sporting Event Rights Holder                 | <input type="checkbox"/> Department of a College or University     |
| <input type="checkbox"/> Venue or Facility               | <input type="checkbox"/> Convention & Visitors Bureau                 | <input type="checkbox"/> Supplier of goods, services, or equipment |
| <input type="checkbox"/> Chamber of Commerce             | <input type="checkbox"/> Department of a Convention & Visitors Bureau | <input type="checkbox"/> Other _____                               |
| <input type="checkbox"/> Department of a Government Unit |   |  |

**Organization Structure**  For Profit  Not-For-Profit **Tax Status**  501(c)(3)  501(c)(6)  Exempt  Other \_\_\_\_\_

**Year of Incorporation** \_\_\_\_\_ **# of Employees** Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

**ORGANIZATION DEMOGRAPHICS**

**Membership Application (continued)**

**Sports** (check all that apply)

- |   |   |   |  |  |  |  |
|---|---|---|--|--|--|--|
| <input type="checkbox"/> Arm Wrestling    | <input type="checkbox"/> Canoe/Kayak    | <input type="checkbox"/> Figure Skating     | <input type="checkbox"/> Karate            | <input type="checkbox"/> Rowing          | <input type="checkbox"/> Swimming              | <input type="checkbox"/> Volleyball        |
| <input type="checkbox"/> Badminton        | <input type="checkbox"/> Cheerleading   | <input type="checkbox"/> Fishing            | <input type="checkbox"/> Lacrosse          | <input type="checkbox"/> Rugby           | <input type="checkbox"/> Swimming & Diving     | <input type="checkbox"/> Wakeboarding      |
| <input type="checkbox"/> Baseball         | <input type="checkbox"/> Climbing       | <input type="checkbox"/> Fitness            | <input type="checkbox"/> Luge              | <input type="checkbox"/> Sailing         | <input type="checkbox"/> Synchronized Swimming | <input type="checkbox"/> Water Polo        |
| <input type="checkbox"/> Basketball       | <input type="checkbox"/> Cricket        | <input type="checkbox"/> Flag Football      | <input type="checkbox"/> Martial Arts      | <input type="checkbox"/> Shooting        | <input type="checkbox"/> Taekwondo             | <input type="checkbox"/> Water Skiing      |
| <input type="checkbox"/> Beach Volleyball | <input type="checkbox"/> Cycling        | <input type="checkbox"/> Footbag            | <input type="checkbox"/> Meeting           | <input type="checkbox"/> Skiing          | <input type="checkbox"/> Team Handball         | <input type="checkbox"/> Watercraft Racing |
| <input type="checkbox"/> Biathlon         | <input type="checkbox"/> Disc Golf      | <input type="checkbox"/> Football           | <input type="checkbox"/> Modern Pentathlon | <input type="checkbox"/> Sled Dog Racing | <input type="checkbox"/> Tennis                | <input type="checkbox"/> Weightlifting     |
| <input type="checkbox"/> Billiards        | <input type="checkbox"/> Diving         | <input type="checkbox"/> Golf               | <input type="checkbox"/> Motorsports       | <input type="checkbox"/> Soccer          | <input type="checkbox"/> Thoroughbred Racing   | <input type="checkbox"/> Wrestling         |
| <input type="checkbox"/> Bobsled          | <input type="checkbox"/> Equestrian     | <input type="checkbox"/> Horseshoe Pitching | <input type="checkbox"/> Race Walking      | <input type="checkbox"/> Softball        | <input type="checkbox"/> Track & Field         | <input type="checkbox"/> Multi Sport       |
| <input type="checkbox"/> Bowling          | <input type="checkbox"/> Extreme Sports | <input type="checkbox"/> Ice Hockey         | <input type="checkbox"/> Racquetball       | <input type="checkbox"/> Speed Skating   | <input type="checkbox"/> Trail Running         | <input type="checkbox"/> Other _____       |
| <input type="checkbox"/> Boxing           | <input type="checkbox"/> Fencing        | <input type="checkbox"/> Inline Hockey      | <input type="checkbox"/> Rifle             | <input type="checkbox"/> Sport Stacking  | <input type="checkbox"/> Triathlon             |  |
| <input type="checkbox"/> Broomball        | <input type="checkbox"/> Field Hockey   | <input type="checkbox"/> Judo               | <input type="checkbox"/> Road Running      | <input type="checkbox"/> Sportaerobics   | <input type="checkbox"/> Ultimate Frisbee      |  |

**ORGANIZATION DEMOGRAPHICS** (Active Membership Only)

**Annual Sports Budget**  \$0 - \$100,000  \$100,001 - \$300,000  \$300,001 & Up

**Approximate Percentage of Each Source of Funding to Annual Sports Budget** (must total 100%)

_____ Corporate Memberships	_____ Event Revenue	_____ Annual Budget of a College or University	_____ Lodging Tax
_____ Corporate Sponsors	_____ Grants from Foundations	_____ Annual Budget of a city, county, region or state government	_____ Other _____
_____ Individual Members	_____ Grant from other sources		

**Organizational Activities** (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Finding event to bid upon                     | <input type="checkbox"/> Supervising aspects of event preparation | <input type="checkbox"/> Creation of sports-related events      |
| <input type="checkbox"/> Assembly of bid team                          | <input type="checkbox"/> Supervising work of LOC                  | <input type="checkbox"/> Manage sporting events                 |
| <input type="checkbox"/> Writing bid                                   | <input type="checkbox"/> Serving of board of LOC                  | <input type="checkbox"/> Marketing and promotion for LOC        |
| <input type="checkbox"/> Presentation of bid                           | <input type="checkbox"/> Sale of event sponsorships               | <input type="checkbox"/> Attracting sports franchises           |
| <input type="checkbox"/> Locating special funding for bid if necessary | <input type="checkbox"/> Marketing and sale of tickets            | <input type="checkbox"/> Assisting sports franchises            |
| <input type="checkbox"/> Assembly of local organizing committee (LOC)  | <input type="checkbox"/> Sports facilities management             | <input type="checkbox"/> Physical fitness and health activities |
| <input type="checkbox"/> Fundraising for LOC                           | <input type="checkbox"/> Sports information resource center       | <input type="checkbox"/> Community recreation activities        |
| <input type="checkbox"/> Recruitment of volunteers                     | <input type="checkbox"/> Creation of sporting events              | <input type="checkbox"/> General community sports education     |
|  |   | <input type="checkbox"/> Other _____                            |

**Contact Information**

**Primary Contact** First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

Communication Preference (check all that apply)  Phone  Email  Fax  Mail

\_\_\_\_\_ Subscription to NASC Learning Center ( \$150 per year)

**Secondary Contact** First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

Communication Preference (check all that apply)  Phone  Email  Fax  Mail

\_\_\_\_\_ Subscription to NASC Learning Center ( \$150 per year)

**Additional Contact(s)** (Attach separate sheet if necessary.) First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

Communication Preference (check all that apply)  Phone  Email  Fax  Mail

\_\_\_\_\_ Subscription to NASC Learning Center ( \$150 per year)

**How did you hear about the NASC?** (check all that apply)

- NASC Event  Mailing  Media  Internet Search  NASC Website  Work  Colleague, referred by: \_\_\_\_\_  Other \_\_\_\_\_

**Payment Information**

*Full payment is required for processing. Applications received without payment will be returned.*

Please indicated for which level of membership your organization is applying (Active, Allied, Rights Holder). \_\_\_\_\_

**Total Payment Enclosed: Including Membership and Learning Center Subscriptions (U.S. Funds) \$** \_\_\_\_\_

**Payment Method** \_\_\_\_\_ Check (payable to NASC) \_\_\_\_\_ Credit Card:  Visa  Mastercard  American Express

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_