NCPP MEMBERSHIP APPLICATION
National Council on Public Polls

Date: __________________

Name_____________________________________________________________

Title______________________________________________________________

Company__________________________________________________________

Address___________________________________________________________

State____________________  Zip___________________

PHONE: ____________________________ FAX: ________________________

E-Mail: (optional): __________________________________________________

Principles of Disclosure: I have read the enclosed “Principles of Disclosure” and agree to follow
the principles set forth in this code. [ ] Yes

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Annual Dues
(Calendar Year)

Please check the Classification below which you feel best describes your level of polling activity:

[ ] Large $750.00
[ ] Medium $500.00
[ ] Small $250.00

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Note: All applications for membership will be acted upon by the Board of Trustees.

Make Checks Payable to: National Council on Public Polls

Mail to:
Dr. Barbara L. Carvalho, Secretary-Treasurer
Marist Institute for Public Opinion
Marist College
Poughkeepsie, NY 12601

Telephone: 845.575.5050 * Fax: 845.575.5111 * Email: info@ncpp.org