



**National Institute of Governmental Purchasing
Columbia Chapter**
Serving
The Greater Portland Area and Southwest Washington.

MEMBERSHIP APPLICATION

Type of Membership: (Check One) _____ **Regular** _____ **Associate**

If admitted to membership, I agree to abide by the Rules and Regulations and Ethics of N.I.G.P. I agree to resign from the chapter in case my duties of employment change and I am no longer qualified to hold membership.

An individual application must be filled out by each applicant

SIGNATURE OF APPLICANT: _____

NAME (Print or Type): _____

POSITION/TITLE: _____

PRESENT CERTIFICATION: _____ **C.P.M.** _____ **CPPO** _____ **CPPB** _____ **OTHER**

PROVIDE A BRIEF DESCRIPTION OF YOUR PURCHASING FUNCTION

AGENCY: _____

DEPARTMENT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: () _____ FAX: () _____

EMAIL ADDRESS: _____

Fax your application to: **Cinna'Mon Williams, MCA, CPPB**, NIGP/Columbia Chapter Membership Director, c/o Housing Authority of Portland, Purchasing Department, 135 SW Ash Street, 5th Floor, Portland, OR 97204, Phone: 503-802-8533, Fax: 503-802-8496, Email Address: cinnamonw@hapdx.org.

No Payment Due Now: You will be invoiced after NIGP/Columbia Chapter Board approves your application.

Regular Membership Fee \$150.00

Associate Membership Fee \$50.00