

# MEMBERSHIP APPLICATION

**Please complete and return this form to**

National Safety Council-Nebraska Chapter  
11620 M Circle  
Omaha, NE 68137



NEBRASKA CHAPTER

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

**Primary Contact:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

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

**Total number of employees (including drivers):** \_\_\_\_\_

**OR REGISTER ONLINE AT**  
[www.SafeNebraska.org/Member](http://www.SafeNebraska.org/Member)

| Employees     | 1 Year   | 2 Years  | 3 Years  |
|---------------|----------|----------|----------|
| 1-49          | \$499    | \$898    | \$1,272  |
| 50-100        | \$549    | \$988    | \$1,400  |
| 101-500       | \$849    | \$1528   | \$2,165  |
| 501-1,000     | \$1,399  | \$2,518  | \$3,567  |
| 1,001-5,000   | \$2,899  | \$5,218  | \$7,392  |
| 5,001-10,000  | \$7,999  | \$14,399 | \$20,397 |
| 10,001-20,000 | \$15,999 | \$28,799 | -        |
| 20,001+       | \$24,999 | \$44,998 | -        |

## CONTACT INFORMATION

**Primary Safety and Health Contact** (For Benefit Fulfillment)

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Additional Contact**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Additional Contact**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## PAYMENT OPTIONS

Payment MUST accompany this application. Please check one:

Check Enclosed Check Number \_\_\_\_\_  
(payable in U.S. funds to National Safety Council)

If you would like to pay with a credit card, please visit us at [www.SafeNebraska.org/member](http://www.SafeNebraska.org/member) or call 402.898.7364 .  
The National Safety Council is committed to protecting the security of your Credit Card information.

## ORGANIZATION LOCATION INFORMATION

Please indicate the number of additional locations (facilities and offices) included in this membership: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To maximize participation of your employees at each of your locations, please attach a list containing location names, titles, addresses, city, state, ZIP+4, phone numbers, fax numbers and email addresses for those covered in this membership. Please fax the list to **402.896.6331** or email it to: **[safety@safenebraska.org](mailto:safety@safenebraska.org)**.

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Omaha, NE 68137

