



National Conference on Public Employee Retirement Systems
The Voice for Public Pensions

Application for Pension Fund Membership

ADDRESS AND CONTACT INFORMATION

Fund Name: _____

Primary Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Fax: _____

E-mail: _____

Please provide your email address to receive a username and password to access the member-only section of www.ncpers.org.

How did you hear about NCPERS: _____

PAYMENT METHODS

☐ **Check for USD\$ _____ enclosed**

Make check payable to NCPERS and mail to

NCPERS
1201 New York Ave, NW, Suite 850
Washington, DC 20005

☐ **Charge my Credit Card for USD\$ _____**

☐ American Express  ☐ Visa  ☐ MasterCard 

Credit Card #: _____

Expiration Date: _____

Verification Code: _____

M/C and Visa: 3 digit code on the back of the card. Amex: 4 digit code on the front of the card.

Name on the Card: _____

Billing Address and zip code: _____

Total Amount Charged: _____

Cardholder Signature (required): _____

This is a request to join NCPERS as a Pension Fund member, subject to the Constitution and the by-laws of the National Conference on Public Employee Retirement Systems.

Signature: _____ Date: _____

Select Annual Dues

Assets Under Management (AUM)

	Annual Dues
<input type="checkbox"/> Less than \$1 Billion AUM	\$305
<input type="checkbox"/> \$1 Billion – \$3 Billion AUM	\$610
<input type="checkbox"/> \$3 - \$5 Billion AUM	\$1,005
<input type="checkbox"/> \$5 - \$10 Billion AUM	\$1,225
<input type="checkbox"/> \$10 - \$50 Billion AUM	\$2,445
<input type="checkbox"/> \$50 Billion - \$100 Billion AUM	\$3,670
<input type="checkbox"/> \$100 Billion - \$150 Billion AUM	\$4,865
<input type="checkbox"/> \$150 Billion AUM and Over	\$6,115

**If you have questions about membership,
contact us at 202-601-2445.**

**Please fax to 202-688-2387, email membership@ncpers.org
or mail to NCPERS, 1201 New York Ave, NW, Suite 850, Washington, DC 20005**