

**ALLIANCE FOR NUCLEAR ACCOUNTABILITY
2020 AUTHORIZATION/RELEASE FORM**

(Please check all items that apply to your organization)

*****electronic copies of the by-laws and policies and procedures are available upon request**

MEMBER: See page 8 of the P&Ps.

_____ My organization would like to continue as a member of ANA. We agree to be listed as a *Member* of the ANA on the ANA brochure, website and ANA Tier 1 letterhead. We understand that, in order to be an ANA member, we must sign on to all of the documents listed below.

Please check off each section to indicate your agreement.

We accept and sign on to:

_____ ANA's By-Laws

_____ ANA's Policies and Procedures (Organization Policies, Sections I. 1 - 16)

_____ ANA's Policies and Procedures (Position Statements, Sections II. 1 - 14)

FRIEND: See page 9 of the P&Ps.

_____ My organization would like to continue as a Friend of the ANA. We agree to be listed as a Friend of the ANA on the ANA brochure and website. We understand that, in order to be an ANA Friend, we must sign on to all of the documents listed below.

Please check off each section to indicate your agreement.

We accept and sign on to:

_____ ANA's By-Laws:

_____ ANA's Policies and Procedures (Organization Policies, Sections I. 1 - 16)

GRASSROOTS ALLY: See page 10 of the P&Ps.

_____ My organization would like to continue as a Grassroots Ally of the ANA. We agree to be listed as a Grassroots Ally of the ANA on the ANA brochure and website. We understand that, in order to be an ANA Grassroots Ally, we must sign on to all of the documents listed below.

Please check off each section to indicate your agreement.

We accept and sign on to:

_____ ANA's By-Laws:

_____ ANA's Policies and Procedures (Organization Policies, Sections I. 1 - 16)

INTERNATIONAL FRIEND: See page 11 of the P&Ps.

_____ My organization would like to continue an International Friend of the ANA. We agree to be listed as an International Friend of the ANA on the ANA brochure and website. We understand that, in order to be an ANA International Friend, we must sign on to all of the documents listed below.

Please check off each section to indicate your agreement.

We accept and sign on to:

_____ ANA's By-Laws:

_____ ANA's Policies and Procedures (Organization Policies, Sections I. 1 - 16)

International Friends do not pay Dues.

DUES:

_____ We agree to pay yearly dues according to the schedule in the ANA Dues Policy.
My organization will pay:

_____ based on our yearly income of _____.

I have answered the questions above and am authorized by my organization to make these decisions on behalf of my organization. If my status changes, I will notify the Alliance for Nuclear Accountability in writing.

Signature Date Organization

How should your organization be listed on the web site and the brochure?

ORGANIZATION NAME: _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE: (____) _____ FAX: (____) _____

E-MAIL: _____ WEB PAGE: _____

The appropriate contact person for ANA-related business is: _____

For the purpose of this form, please name one contact only. email: _____

Please send this form to by email to orep@earthlink.net or by snailmail to:

**Ralph Hutchison
P O Box 5743
Oak Ridge, TN 37831**

and send your dues (check made out to ANA) to:

**Jennifer Viereck
P O Box 1403
Abiquiu NM 87510**