



Problem Gambling Network of Ohio Membership Form

Building a network of support for those impacted by gambling through
collaboration, education and research

Please select the appropriate box: New Member Renewing Member
Membership Level: PGNO-\$50 Dual-\$100 Organization-\$500

Name: _____
Job Title: _____ Organization: _____
Work Address: _____ City: _____ State: _____ Zip: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Email Address: _____ Business: Personal:
Phone: _____ Business: Personal:

Membership Levels & Benefits:

PGNO: Members will receive access to free webinars, both in-person and archived in the PGNO Member Center, training/conference discounts, newsletters, announcements, and networking with fellow members.

Dual: PGNO & National Council on Problem Gambling (NCPG) memberships, valued at \$130! Benefits include those in the PGNO membership PLUS \$100 discount on the registration rate of the NCPG Conference, \$100 discount when registering for the ICGC exam.

Organization: Includes five (5) Dual memberships, and related benefits, as well as discounted trainer rates, discounted rates for PGNO sponsored events.

For **Organizational memberships**, please include **both** the individual names and a contact email below as well as a membership form for each person.

1. Name: _____ Email Address: _____
2. Name: _____ Email Address: _____
3. Name: _____ Email Address: _____
4. Name: _____ Email Address: _____
5. Name: _____ Email Address: _____

For additional membership options, including **Corporate & Student Memberships**, contact PGNO at info@PGNOhio.org or (614) 750-9899.

The Problem Gambling Network of Ohio (PGNO) membership support efforts to address problem gambling issues in Ohio. PGNO is a 501(c)(3) non-profit organization.

Prices effect through June 30, 2021

19.07

MEMBERSHIP IS WONDERFUL – INVOLVEMENT IS EVEN BETTER!

Make a difference and join a committee. Select an interest or skill that you would like to share with PGNO.

- | | |
|----------------------|-------------------------|
| _____ Advocacy | _____ Social Media |
| _____ Communications | _____ Speakers Bureau |
| _____ Membership | _____ Treatment |
| _____ Prevention | _____ Quality Assurance |

Membership Payment

- Paid by check
- Online at PGNOhio.org
- Purchase Order # _____

Please confirm the following statements:

- I approve for the above-named individual and contact information to be included in a networking directory
- I hereby give my consent for the Problem Gambling Network of Ohio (PGNO) to use my photograph and likeness in all forms and media advertising, trade, and any other lawful purposes.
- I would like to receive a charitable donation receipt.

Member Signature: _____ Date: _____

Mail form and check payable to the Problem Gambling Network of Ohio to:
The Problem Gambling Network of Ohio
Attn: Derek Longmeier
355 E. Campus View Blvd,
Suite 285
Columbus, OH 43235

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