SPORTS & FITNESS INDUSTRY ASSOCIATION (SFIA) MEMBERSHIP APPLICATION



NON-PROFIT

Complete the form below and send to choffman@sfia.org sign up for membership

RULES OF ELIGIBILITY

Any organization classified as a Non-Profit, shall be eligible for Non-Profit Membership in the Association.

Memberships are Jan 1. - Dec 31, renewing yearly

Membership Level (based on your annual revenue, check one)						
ANNUAL REVENUE	ANNUA	ANNUAL DUES				
Non-Profit	\$1.070	\$1.070				
By checking the box and signing below, I certify that the above revenues most accurately reflect the annual revenues of this company. If asked, I will send in documentation to support my answer.						
Signature						
Payment Method:	Electronic Bank Transfer	Credit Card				

Invoice & payment details will be sent to your email based on the selection above.

NOTE: These are not deductible as charity contribution, but are as ordinary and necessary business expenses. We estimate that 12.6% of your dues payment is allocable to lobbying and political activity, which is not deductible as an ordinary and necessary business expense. SFIA FEDERAL ID# 36-0753520.

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Complete membersh		rm	n below and send to <u>choffman@sfia.org</u> sign	up for	
Company N	lame :				
Best Addres	ss :				
City	:				
State and Z	ip :				
Best Phone	:				
Best Email	:				
Tax ID	:				
			nember company must designate a company embership benefit information. Please list you		
Full Name	:				
Title	:				
Email Addre	ess :				
mail a	as it d	eer	his box, SFIA has our permission to contact us regns appropriate. SFIA's Privacy Policy is available or mission.		
			FULL NAME		
Presi	ident	:	Er	mail :	
Mark	eting	:	Er	mail :	
HR		:	Er	mail :	
R&D		:	Er	mail :	
Sales	S	:	Er	mail :	

Send completed forms and questions to choffman@sfia.org