

ASSOCIATE

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

■ RULES OF ELIGIBILITY

Any person, firm or corporation which desires a formal relationship with the Association but is not eligible to join another membership classification shall be eligible for Associate Membership in the Association.

Examples include: Law firms, Investment firms, Advisories, Marketing firms etc.

Memberships are Jan 1. - Dec 31, renewing yearly

Membership Level (based on your annual revenue, check one)

<u>ANNUAL REVENUE</u>	<u>ANNUAL DUES</u>	<u>ANNUAL REVENUE</u>	<u>ANNUAL DUES</u>
<input type="checkbox"/> Greater than \$2.5 Billion	\$43,400	<input type="checkbox"/> \$25 Million to \$50 Million	\$6,330
<input type="checkbox"/> \$1 Billion to \$2.5 Billion	\$31,000	<input type="checkbox"/> \$10 Million to \$25 Million	\$5,180
<input type="checkbox"/> \$500 Million to \$1 Billion	\$22,600	<input type="checkbox"/> \$5 Million to \$10 Million	\$4,050
<input type="checkbox"/> \$250 Million to \$500 Million	\$14,800	<input type="checkbox"/> \$2 Million to \$5 Million	\$2,850
<input type="checkbox"/> \$100 Million to \$250 Million	\$11,400	<input type="checkbox"/> \$1 Million to \$2 Million	\$2,080
<input type="checkbox"/> \$50 Million to \$100 Million	\$9,200	<input type="checkbox"/> Less than \$ 1 Million	\$1,150

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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Company Name :

Best Address :

City :

State and Zip :

Best Phone :

Best Email :

Tax ID :

Each member company must designate a company executive to receive membership invoices and membership benefit information. Please list your company's representative:

Full Name :

Title :

Email Address :

By checking this box, SFIA has our permission to contact us regarding industry matters by email, fax, or mail as it deems appropriate. SFIA's Privacy Policy is available online at www.sfia.org. I have the authority to give this permission.

FULL NAME

President :	<input type="text"/>	Email :	<input type="text"/>
Marketing :	<input type="text"/>	Email :	<input type="text"/>
HR :	<input type="text"/>	Email :	<input type="text"/>
R&D :	<input type="text"/>	Email :	<input type="text"/>
Sales :	<input type="text"/>	Email :	<input type="text"/>

Send completed forms and questions to choffman@sfia.org