



# MEMBERSHIP APPLICATION

## Association Supplier

- Primary Supplier Member – \$385.** Non-voting representative of an entity that provides products and services to associations; this includes sales staff of meeting sites and convention center sales personnel.
- Secondary Supplier Member – \$285.** Non-voting, second representative of an entity that provides products and services to associations; this includes sales staff of meeting sites and convention center sales personnel.
- Corporate Supplier Member – \$940.** Non-voting company membership; this includes all sales staff of meeting and convention sites with sponsorship benefits included.
- Student – \$30.** Non-voting full-time student.

***Please print, type or attach business card and return to ISAE.  
Mail to the address below or email to [info@isae.org](mailto:info@isae.org).***

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_

Organization Purpose/Mission \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about ISAE?  Member referral  Non-member referral  Educational program  
 Mailing  ASAE  Internet

If member referral, name of member: \_\_\_\_\_

What is your primary reason for joining ISAE?  New to position  Networking  Educational programs  
 Career development  Boss/colleague recommendation

Tell us about your organization:

Product/service provided \_\_\_\_\_ # of FTE staff \_\_\_\_\_ Meeting capacity \_\_\_\_\_

*The undersigned agrees that by becoming a member of ISAE, he/she is consenting to the receipt of faxes and email messages from ISAE at the contact fax number and email address listed above. The undersigned also authorizes ISAE to use photographs of him/her with or without his/her name and for any lawful purpose, including marketing promotion (print, social media and web content). This application is signed below by the member or duly authorized representative of the member.*

Signature \_\_\_\_\_

**Payment Options:**  Check enclosed  Credit Card

Card Type (Visa, MC, AmEx): \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

*ISAE dues are not deductible as a charitable contribution, but may be deductible as an ordinary and necessary business expense. To the extent ISAE engages in lobbying, 100 percent are deductible as an ordinary and necessary business expense. ISAE membership is individual rather than organizational, and is portable in the event of a change in employment, except for supplier members.*

