



# MEMBERSHIP APPLICATION

## Association Professional

- Primary Member – \$330.** First person to join from a trade, professional, technical, educational, philanthropic or business association or entity.
- Secondary Member – \$230.** Second person from an entity that already has a primary member.
- Additional Staff Member – \$90.** All others from an entity that already has a primary and secondary member.
- Virtual Member – \$55.** Access to digital resources; member rate for online education.
- Retired or Student Member – \$35.** Non-voting, retired executive who is no longer employed or seeking employment, or full-time student.

**Please complete the form and 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 \_\_\_\_\_  
Birth Date \_\_\_\_\_

Career stage:  Early (0-5 years)  Mid-Career (6-15 years)  Established (16+ years)

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

What is your primary interest for ISAE professional development?

CEO interests  CAE interests  Government affairs  Membership  
 Marketing/communications  Finance  Meeting planning  Small staff issues

*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: \_\_\_\_\_ CVV: \_\_\_\_\_

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.*

