



## Application For Membership

Company Name: \_\_\_\_\_

Main Contact: \_\_\_\_\_

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

Type of Membership (check one):

- Student \$25
- Young Professional \$45
- Individual \$95
- Small Org. (2-4) \$145
- Large Org. (5+) \$175

Contact Email: \_\_\_\_\_

Billing Contact: \_\_\_\_\_

Type of Organization: \_\_\_\_\_

Committee (Brackets, Brand[aid], Events/Programming):  
\_\_\_\_\_

Other members:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

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