

MEMBERSHIP APPLICATION

Business Partners

Company Name				
Contact Person				
Address (Street, Cit	y, State, Zip)			
Phone Number		Fax Num	ber	
Email Address		Website Address		
Products and Service	es Offered			
Referred By				
Membership Due	es Information Membership entitles yo	ou to benefits	in three	e organizations: PMAWM, PMAM and NAA.
Membership Dues(membership is for a 12 month period from January through D Application Fee (Required)		ecember)\$40.	00	*Membership Dues are not deductible as a charitable deduction but they may be deducted as a business expense. A portion of the dues are used for direct lobbying expense, please check with the association for this percentage of non-deductible dues.
Business Develop	oment			ADVERTISING OPPORTUNITIES
I'm interested in the following programs: ☑	n interested in Program Sponsorship e following Presentation of Educational Formats			Bi-monthly "redirection" Newsletter Annual Directory Sponsorships Website Banner Ads
Payment Information Form of Payment [Information of Payment Information of Payment Informat	Cash Check Credit Card (MasterCard, Visa, American Express, Discover) F paying by card) Exp. CVC	law faxe eve	s of PM es, ema nt, mer	ture constitutes your agreement to abide by the by-IAWM. As a member of PMAWM you agree to receive ils, phone calls and mailings pertaining to any PMA mber-to-member discounts or advertisements.