## **CAI Manager Membership Application**



Joining CAI is easy. Simply follow the steps below. Please print clearly.

OR skip the form, join online and start receiving your benefits today! >>

STEP 1: Membership Contact Information Membership materials will be sent to this address

	Once your application is processed, you can supply an alternate/se				DATE	
O MR. O MRS. O MS. O MX. O DR. FIRST NAME			LAST NAME		SUFFIX	
TITLE					BUSINESS ACRONYM	
BUSINESS/ORGANIZATION (SPELL OUT COMPLETE	ELY)					
O BUSINESS OR O HOME ADDRESS						
CITY						
STATE/PROVINCE			POSTAL CODE		_COUNTRY	
		DIRECT PHONE				
MOBILE PHONE			HOME PHONE			
BUSINESS FAX			UNIQUE EMAIL ADDRESS			
BUSINESS WEBSITE						
Did someone recommend that you join CAI?	Places give no	mo and organization				
Dia someone recommend that you join CAI?	riease give na	ime and organization				
Diagram Outline and						
Privacy Option (visit www.caionline.org/about/privacy O I do not wish my name and/or address info			e organizations for promotic	anal nurnoses		
The flot wish my hame and/or address into	omation to be	provided to arry outside	e organizations for promotic	mai paiposes.		
STEP 2: Calculate Your Member	Dues					
Membership Fee		\$135				
Advocacy Support Fee		\$20				
Total Membership Dues		\$155				
Foundation Donation (optional	l)	\$10				
Total Dues including Foundation	on Donation	\$165				
Total Dues including Foundation	20 Advocacy S	upport Fee goes direc	tly to states with Legislative	Action Committees an	d supports the efforts of CAI to represent	
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## STEP 5: Submit your application and payment. Note: credit card payments may not be submitted by mail.

PHONE: (888) 224-4321 (credit cards only)

ONLINE: www.caionline.org/join (credit cards or electronic check only)—start enjoying your benefits today!

MAIL: CAI, P.O. Box 748562, Atlanta, GA 30374-8562 (checks only)

EMAIL: payments@caionline.org (credit cards only)