



# MEMBERSHIP

- Primary Member - \$265.** First person to join from a trade, professional, technical, educational, philanthropic, or business association or entity; also includes President/CEO/Ex Dir of convention & visitors bureaus
- Secondary Member - \$185.** The second person from an entity that already has a primary member
- Additional staff - \$50.** All others from an entity that already has a primary and a secondary member
- Associate - \$320.** 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
- Second Associate - \$210.** 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
- Retired - \$25.** Non-voting; retired executive no longer employed or seeking employment by an association
- Student - \$25.** Non-voting; full-time student

Print, type or attach business card and return to ISAE, or fax to 317-280-8527.

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

Org \_\_\_\_\_

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

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

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**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?**    CAE/CEO Interests    Government Affairs

Marketing/Communications    Finance    Membership    Small Staff Issues    Meeting Planning

**Tell us about your organization.** Budget size \$ \_\_\_\_\_ # of FTE staff \_\_\_\_\_ # of members \_\_\_\_\_

*The undersigned agrees that by becoming a member of ISAE, he/she is consenting to the receipt of faxes and e-mail messages from ISAE] at the contact fax number and e-mail address listed above. This application is signed below by the member or a duly authorized representative of the member.*

Signature \_\_\_\_\_

**Payment Options.**    Check Enclosed    Visa/MasterCard    Amex

Card number \_\_\_\_\_ Exp Date \_\_\_\_\_

Signature \_\_\_\_\_ Name on card if other than above \_\_\_\_\_

*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% 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 associate members.*

**Indiana Society of Association Executives ♦ 9100 Purdue Road #200 ♦ Indianapolis, IN 46268**  
**Phone: 317-328-4569 ♦ Fax: 317-280-8527 ♦ Website: www.isae.org**