



- Professional Member - \$280**
 (Individual from an association)
- Additional Association Staff Member - \$185**
- Affiliate Member - \$65**
 (Student or instructor)
- Associate Member - \$310**
 (Companies or firms marketing or supplying goods or services to associations)
- Allied Associate Member - \$185**
 (Additional individuals from an associate member company or firm)

Full Name _____ Nickname _____

Designation: _____

Title/Position: _____

Association/Company: _____

Address: _____

City/State/Zip _____

Mailing Address: _____

(If different from Street Address)

City/State/Zip _____

Phone: _____ Fax: _____ Cell: *(optional)* _____

E-Mail: _____ Website: _____

Staff Size: _____ No. of Members: _____ No. of Committees: _____

Annual Budget: _____ IRS Status: _____ Education: _____

Payment

- Check Enclosed American Express Visa MasterCard

Cardholder Name: _____

Card Number _____ Expiration Date: _____

Signature: _____

How did you hear about us? _____

Please make checks payable to CSAE and mail to:

Colorado Society of Association Executives 2170 S. Parker Rd., Suite 120, Denver, CO 80231
 Or provide credit card data and fax to **(303) 368-4222** You may also apply online at www.csaenet.org