



**1. MEMBERSHIP CONTACT INFORMATION**

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

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

City: \_\_\_\_\_ State/Prov. \_\_\_\_\_ Postal: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Web: \_\_\_\_\_

Company email address\*\*: \_\_\_\_\_

**\*Canadian Members Note:**  
Please OPT IN to receive TCIA emails by signing here \_\_\_\_\_

**\*\* Company marketing email address**

**2. KEY PERSONNEL FOR MARKETING, BILLING & SALES**

Name of Owner/Officer: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Marketing/Advertising Rep: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Accounting/Billing Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

**3. DESCRIBE YOUR PRODUCT OR SERVICE necessary to be included in listings.**

50-word maximum:

**4. PAYMENT TYPE**

Manufacturing Company - \$750    Distributing Company - \$550    Support Services Company - \$550

Method of Payment:  Amount paid  \*Card Number:  Expiration Date:

Name on card  CVV Code

\*Authorized Signature for this Application:  \*Date:

**Your membership will begin upon receipt of the following items:**

1. This completed membership application
2. Payment of \$750 or \$550 (Checks payable to: TCIA)

**TCIA cannot accept credit card payment information by email.**

If you have any questions, please contact the Corporate team at 800-733-2622  
[corporate@tcia.org](mailto:corporate@tcia.org)

Dues payments are tax deductible as ordinary and necessary business expenses. TCIA estimates that 95% of your dues payment is deductible as a business expense (5% is not deductible due to TCIA's direct lobbying activities on behalf of its members).