

# MEMBERSHIP APPLICATION/RATES

**Regular Members** shall include any firm, corporation and other for-profit entities that own, produce or provide full service management of “face to face” trade shows, consumer shows, expositions, conferences and/or similar events that represent a substantial part of their business, and which meet such other reasonable qualifications as may be determined by the Board of Directors from time to time.

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Company Website (URL): \_\_\_\_\_

Primary Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Secondary Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Third Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Member Billing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country (If other than the US) \_\_\_\_\_

Number of Employees \_\_\_\_\_

If you wish to appoint a representative other than the primary representative above, to receive all of the mail information, please provide alternative address information for that person below:

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country (If other than US) \_\_\_\_\_ Fax#(\_\_\_\_) \_\_\_\_\_

**Please list your top three trade shows:**

Trade show name and website URLs	No. of Exhibitors	No. of Attendees	Net Sq. Footage or Meters
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total number of shows: _____ Exhibitors _____ Attendees _____ Sq. Footage/Meters _____			

**Your annual dues are based upon your annual gross revenue • Please check mark the appropriate Membership Level**

Gross Annual Revenue (USD)	Annual Dues	Gross Annual Revenue (USD)	Annual Dues
<input type="checkbox"/> \$0 - \$500,000	\$450	<input type="checkbox"/> \$50 Million - \$250 Million	\$6,000
<input type="checkbox"/> \$500,000 - \$1 Million	\$950	<input type="checkbox"/> \$250 Million - \$1 Billion	\$10,000
<input type="checkbox"/> \$1 Million - \$10 Million	\$1,750	<input type="checkbox"/> \$1 Billion - \$2 Billion	\$12,500
<input type="checkbox"/> \$10 Million - \$50 Million	\$3,500	<input type="checkbox"/> Over \$2 Billion	\$24,000

Upon approval you will receive an invoice for your membership, plus any pro-rated amount to bring your dues within SISO's cycle.

All information is kept confidential. Please complete this form and email to Vincent@SISO.org

For office use only

☐ Approved ☐ Not Approved Date: \_\_\_\_\_ By \_\_\_\_\_ Reason \_\_\_\_\_