



# IMIA Membership Application

## Company Information

Company Name \_\_\_\_\_ No. of Employees \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province/Region \_\_\_\_\_ Postal/Zip \_\_\_\_\_ Country \_\_\_\_\_

Main Point of Contact \_\_\_\_\_ Position \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## Additional Contacts

Please provide the names, titles and email addresses of any additional employees that would like to receive IMIA Communications:

Name & Title	Email
1. _____	_____
2. _____	_____
3. _____	_____

Type of Business (Select up to 3 listed at the bottom of this application).

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Company Description \_\_\_\_\_

Web Address \_\_\_\_\_ Social Media Handles \_\_\_\_\_

### Annual Membership Fees

- 1-5 Employees – \$175 USD
- 6-20 Employees – \$295 USD
- 21-50 Employees – \$495 USD
- 51+ Employees – \$995 USD
- Education – \$95 USD
- Government – \$195 USD
- Industry Retiree – \$50 USD
- Individual – \$75 USD

## Type of Business

- |                                     |                       |
|-------------------------------------|-----------------------|
| Cartographic Services               | Government            |
| Data Provider                       | Printer               |
| Distributor                         | Publisher             |
| Education                           | Retail & E-Commerce   |
| Geographic Information System (GIS) | Software & Technology |
| Globe Manufacturer                  | Other                 |