



MEMBERSHIP APPLICATION

Questions? Call Deborah Fox, Director of Membership, at 212-681-2014
or Sara Sprague, Membership Services Administrator, at 212-681-2011

Name: _____ Year of Birth: _____ Male Female

Title: _____

Company: _____

Street Address: _____

City: _____ State/Province: _____ Postal Code: _____

Telephone: _____ Facsimile: _____

Email: _____ State/Province of Incorporation: _____

Stock Exchange Listing(s): _____ If your company became public in the past three years, what year? _____

What is your company's industry type?
(please choose one)

- Advertising & Publishing
- Agriculture or Mining
- Banking or Finance
- Energy
- Healthcare or Pharmaceutical
- Insurance
- Manufacturing - Consumer
- Manufacturing - Industrial
- Media/Communications
- Non-Profit or Public Admin
- Professional Services
- Public Utility/Utility Holding
- Real Estate or Construction
- Retail/Wholesale
- Technology (including software)
- Transportation or Distribution
- Other: _____

What's your company's approximate market capitalization?

(Please see 4th and 5th responses if your organization is privately held or a non-profit. Market cap = Number of outstanding shares multiplied by current per share price.)

- < \$700 million Privately held
- \$700M - \$10B Non-profit
- > \$10 billion

If not noted in your title, do you also serve as company

- Secretary Assistant Secretary

Are you a lawyer? Yes No

How did you hear about the Society?

- Current Member (Name): _____
- Local chapter I am a former Society member
- Consultant/Vendor Tip from colleague
- Internet Seminar mailing
- News media Other: _____

- \$645 (\$545 dues for first member plus \$100 one-time entrance fee)
- \$545 (Former member pays dues only - no entrance fee required)
- \$495 (\$395 dues for additional member plus \$100 one-time entrance fee)
- \$395 (Additional former member pays dues only - no entrance fee required)

There is no reduced fee for additional persons with firms that provide services to the corporate secretarial function (e.g. proxy solicitors, bank trust officers, transfer agents, financial printers, and attorneys in private practice).

- Check is enclosed Charge to: American Express VISA Mastercard

Card No.: _____ Expiration Date: _____

Signature: _____