



2207 Forest Hills Dr
 Harrisburg, PA 17112
 Phone: 717.614.4270
membership@pasae.org

Membership Application

January 1 - December 31

Organization / Company Information

Organization/ Business:	
Acronym:	
Address:	
City / State / Zip:	
Primary Contact:	
Office Phone:	
Office Fax:	
Office Email:	
Website:	
Business Type:	<input type="checkbox"/> Accounting <input type="checkbox"/> Entertainment <input type="checkbox"/> Other: <input type="checkbox"/> Association <input type="checkbox"/> Hotel/Meeting Facility <input type="checkbox"/> Attorney <input type="checkbox"/> Marketing Services <input type="checkbox"/> CVB <input type="checkbox"/> Nonprofit <input type="checkbox"/> Convention Center <input type="checkbox"/> Printing/Publishing/Consulting <input type="checkbox"/> Convention Supplier <input type="checkbox"/> Training/Speaking

Payment Information

Yearly membership dues: \$350.00 (Dues are prorated at \$29.17 per month.)

PASAE dues are not deductible as a charitable contribution for federal income tax purposes but may be deducted as a business expense.

Check:

I have enclosed check # _____ in the amount of \$ _____

Credit Card (We accept Visa, MasterCard, and Discover):

Card Type: _____

Card Number: _____

Expiration: _____

**Return application
with payment to:**

**PASAE
2207 Forest Hills Dr
Harrisburg, PA 17112**

Please include staff information for your organization on the other side.



Employee Information

Membership covers ALL employees of your organization.

Please list all employees of your organization that should receive communication regarding upcoming events:

Full Name: _____ Nickname for Badge: _____

Title: _____

Email address: _____ # of years in association and nonprofits: _____

Professional Interests:

Communications Government Relations Membership

Executive Management Marketing Sales

Finance/Business Operations Meetings Technology

Other: _____

Designations:

CAE

CMP

Other _____

Full Name: _____ Nickname for Badge: _____

Title: _____

Email address: _____ # of years in association and nonprofits: _____

Professional Interests:

Communications Government Relations Membership

Executive Management Marketing Sales

Finance/Business Operations Meetings Technology

Other: _____

Designations:

CAE

CMP

Other _____

Full Name: _____ Nickname for Badge: _____

Title: _____

Email address: _____ # of years in association and nonprofits: _____

Professional Interests:

Communications Government Relations Membership

Executive Management Marketing Sales

Finance/Business Operations Meetings Technology

Other: _____

Designations:

CAE

CMP

Other _____