



# CORPORATE AFFILIATION APPLICATION

The Association for Information Communications Technology Professionals in Higher Education

Corporate affiliation is available to technology companies serving higher education and to consultants in the field of information communications technology.

## I. COMPANY INFORMATION (PLEASE TYPE OR PRINT THIS APPLICATION)

COMPANY \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP+4 \_\_\_\_\_  
 COMPANY URL: \_\_\_\_\_

**II. CORPORATE REPRESENTATIVE:** The corporate representative and additional corporate employees may attend ACUTA events at the member rate and will receive all membership mailings. The names of additional corporate employees will be requested upon approval of corporate affiliation.

NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_  
 SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

How, or from whom, did you learn about ACUTA? \_\_\_\_\_

## III. PLEASE INDICATE CATEGORY OF AFFILIATION YOU ARE REQUESTING:

- GOLD \$3214 (corporate rep plus up to 11 corporate employees)
- SILVER \$2287 (corporate rep plus up to 7 corporate employees)
- BRONZE \$1587 (corporate rep plus up to 4 corporate employees)
- COPPER \$ 763 (corporate rep plus 1 corporate employee)

## IV. DUES

All dues must be paid in full before application for membership has final approval. Enclosing your dues payment with your membership application will allow immediate approval of your application and expedite your participation in ACUTA benefits. Dues are non-refundable. Payment of new affiliation dues received January-December 2012 covers membership through June 30, 2013. Hereafter, dues will be invoiced annually in May for the following year, which begins July 1.

### CHECK ONE:

- My company requires an invoice.  
E-mail invoice to: \_\_\_\_\_
- Full dues are enclosed. Please make checks payable to ACUTA, Inc.  
(Federal tax ID number 61-1185913)

- VISA  MASTERCARD  AMERICAN EXPRESS  DISCOVER

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

E-mail for receipt \_\_\_\_\_

Cardholder's name \_\_\_\_\_

Signature \_\_\_\_\_

Please write a 35-word description of the products and services you offer the higher ed market. This will be used to introduce you to our membership in the next monthly eNews. Submit here or e-mail to pscott@acuta.org.

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Send dues to: ACUTA • 152 West Zandale Drive, Suite 200 • Lexington, KY 40503-2486  
 Fax: (859) 278-3268; Telephone: (859) 278-3338 x222; E-mail: mwest@acuta.org

### FOR ACUTA USE ONLY

Application accepted  Application denied: reason \_\_\_\_\_

Approving signature \_\_\_\_\_ Date \_\_\_\_\_

Classification:  Gold  Silver  Bronze  Copper

Region: \_\_ Northeast (1) \_\_ Southeast (2) \_\_ Midwest (3) \_\_ West (4) \_\_ Canada (5)

Check # \_\_\_\_\_ \$ \_\_\_\_\_ Date \_\_\_\_\_

Tracking Code WEB