

Membership Application 2019

For questions, contact membership@idealliance.org or call 703-837-1070

1 MEMBER INFO

Official Corporate/Organization Name

Primary Address..... City.....

State..... Postal.....

Country..... Office Telephone

Twitter @..... Web Address.....

How many employees are in your company (or related department)?.....

Primary Company Contact

Title.....
(Serves as official delegate to Idealliance by receiving annual membership dues invoice, ballot for election of Directors, and other mailings.)

Phone..... Mobile..... Email.....

Professional Areas of Interest: CEO & Leadership Business Operations & Finance Sales & Marketing
 Cross Media Content Creation, Management, & Publishing Print Media Creation, Production, & Workflows
 Mail Supply, Fulfillment, & Postal

Secondary Company Contact

Title.....

Phone..... Mobile..... Email.....

Professional Areas of Interest: CEO & Leadership Business Operations & Finance Sales & Marketing
 Cross Media Content Creation, Management, & Publishing Print Media Creation, Production, & Workflows
 Mail Supply, Fulfillment, & Postal

Additional Company Contact

Title.....

Phone..... Mobile..... Email.....

Professional Areas of Interest: CEO & Leadership Business Operations & Finance Sales & Marketing
 Cross Media Content Creation, Management, & Publishing Print Media Creation, Production, & Workflows
 Mail Supply, Fulfillment, & Postal

Additional Company Contact

Title.....

Phone..... Mobile..... Email.....

Professional Areas of Interest: CEO & Leadership Business Operations & Finance Sales & Marketing
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5 FEEDBACK

How did you hear about Idealliance?

Event (list)..... Search Engine (list).....

Website (list)..... Referral Company or Person (list).....

Other (list).....

2 COMPANY TYPE Check **ALL** services your company provides

1. Academic
2. Advertising/Marketing/Creative
3. Brand Management
4. Brand Owner
5. Consulting - Digital Media/Content Workflow
6. Consulting - Mail Workflow
7. Consulting - Print/Color
8. Data Management
9. Fulfillment Services
10. Government Agency
11. Mail Services
12. Non-Profit
13. Postal Logistics/Transportation Services
14. Premedia/Production Workflow
15. Printer - Book
16. Printer - Commercial
17. Printer - Digital
18. Printer - Direct Mail
19. Printer - In-Plant
20. Printer - Magazine/Catalog
21. Printer - Packaging
22. Publisher - Book
23. Publisher - Catalog
24. Publisher - Education
25. Publisher - Magazine
26. Software/Services - Digital Media/Content Workflow
27. Software/Services - Mail Workflow
28. Software/Services - Print/Color
29. University
30. Supplier - Content/Color Equipment/Software
31. Supplier - Ink
32. Supplier - Material
33. Supplier - Paper
34. Supplier - Press Equipment
35. Other

3 PAYMENT OPTIONS (in USD)

Annual Member Dues.....

See page 2 for dues schedule. Idealliance dues are automatically invoiced each year on anniversary date of joining. Annual dues payment required to initiate membership.

Credit Card: Visa MasterCard Amex

Name on Card.....

Account Number.....

Exp. Date.....

Signature.....

4 TO JOIN Submit completed form with annual membership dues by:

MAIL: Idealliance
 1800 Diagonal Road, Suite 320,
 Alexandria, VA 22314-2862

EMAIL: membership@idealliance.org

FAX: 703.837.1072