



IAABC MEMBERSHIP APPLICATION

COMPANY INFORMATION

Company Name:

Office Phone:

Mobile Phone:

Alternate phone:

Physical address:

City:

State:

ZIP Code:

Services Provided:

REPRESENTATIVES INFORMATION

Primary Contact:

Address:

Phone:

E-mail:

Fax:

City:

State:

ZIP Code:

Title:

ADDITIONAL INFORMATION

Full Time Employees:

Part Time Employees:

Date Founded:

Professional Employees:

Industry Category:

PAYMENT INFORMATION

Circle One: MasterCard/Visa

Card Number:

Check#

Billing Address:

Expiration Date:

CWV#:

City:

State:

ZIP Code:

Membership Level:

REFERENCES

Name

Address

Phone

AGREEMENT

I authorize the verification of the information provided on this form as to my credit and references. I have received a copy of this application. I understand that this is a one year membership which will automatically renew one year from date of application. If method of payment is credit card, I authorize the IAABC to charge my credit card per the authorized amount of my membership based on the terms selected.



Signature of applicant:	Date:
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Remit to: INDIANAPOLIS AFRICAN AMERICAN BUSINESS COUNCIL 2920 NORTH
KEYSTONE AVENUE INDIANAPOLIS IN 46218

INDIVIDUAL INVESTMENT SCHEDULE

SILVER \$49 Yearly

The Silver membership is our entry-level membership and gives you access to member-only events, products, and IAABC association.

GOLD \$99 Yearly

The Gold membership is a sensible and affordable membership, perfect for many individuals. Members receive all of the Silver membership benefits plus additional marketing tools, discounts on products and entry to IAABC workshops and classes.

PLATINUM \$149 Yearly

The Platinum membership gives you a step up from Gold. Gain access to some of our more exclusive invite-only events and receive even more benefits tools by becoming a Platinum member.