



Small Business Technology Council – Membership Application

I would like my company to enjoy the advantages of SBTC membership. Please sign us up!

First Name _____ Last Name _____
 CEO's Name(s) _____
 Company Name _____
 Title _____ Year Founded _____
 Email address _____ Website _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____
 Products/Services Offered: _____

Indicate Your Annual Revenue/Dues

Your Firm	Company Size / Type	Dues
	Less than \$500,000	\$250
	\$500,000 to \$1 million	\$500
	\$1 million to \$5 million	\$750
	\$5 million to \$10 million	\$1,000
	\$10 million to \$25 million	\$1,400
	\$25 million to \$50 million	\$2,100
	More than \$50 million	\$3,000
	Affiliate* <i>Nonprofit and smaller professional, educational and contract service organizations that provide business support services.</i>	\$500
	Corporate* <i>SBTC's corporate recognition package for larger companies and educational institutions. Call for details.</i>	\$5,000

Number of Employees

- 1 to 9 25 to 49 100 to 249
 10 to 24 50 to 99 250 to 500

Payment Type:

- Check Credit Card: Visa Master Card American Express Discover

Credit Card Number _____
 Expiration Date _____ Name on Card _____
 Signature _____

This form must be received with payment in order for your SBTC membership to be processed. Please fax or mail this form to:

Mail: SBTC Membership, 1156 15th Street, NW, Suite 502, Washington, D.C. 20005
 Fax: 202-872-8543

For assistance, please contact David Nadler at 386-317-5627 or dnadler@nsba.biz

** SBTC dues are 75% deductible as a business expense for federal tax purposes.*

*** SBTC memberships are not refundable.*