



## 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

Company Size / Type	Dues
Less than \$500,000	\$350
\$500,000 to \$1 million	\$750
\$1 million to \$5 million	\$1,000
\$5 million to \$10 million	\$1,500
\$10 million to \$25 million	\$2,500
\$25 million to \$50 million	\$4,500
More than \$50 million	\$7,500
Affiliate* <i>Nonprofit and smaller professional, educational and contract service organizations that provide business support services.</i>	\$1,000
Corporate* <i>SBTC's corporate recognition package for larger companies and educational institutions. Call for details.</i>	\$10,000

### 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 15<sup>th</sup> 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](mailto:dnadler@nsba.biz)**

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

*\*\* SBTC memberships are not refundable.*