



# 2010 TAG/WTIA Membership Application

TAG is affiliated with Washington Technology Industry Association (WTIA) and as a member of TAG you enjoy dual membership in WTIA. Your annual membership dues are handled by WTIA and cover member benefits in both organizations. Sign up by mailing this form to WTIA or sign up online at [www.washingtontechnology.org](http://www.washingtontechnology.org)

Mr. Ms. Mrs.

**Key Contact:**

COMPANY NAME: \_\_\_\_\_ Title \_\_\_\_\_ Email Address \_\_\_\_\_  
 First Last General Email:

Primary Officer/CEO: \_\_\_\_\_ Title \_\_\_\_\_ Email Address \_\_\_\_\_

HR Contact: \_\_\_\_\_ Title \_\_\_\_\_ Email Address \_\_\_\_\_

A/P Contact: \_\_\_\_\_ Title \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Website \_\_\_\_\_

Company Description (655 characters to be printed in **directly** – if needed, please attach 2<sup>nd</sup> page): \_\_\_\_\_

Have you ever been a member before?  Yes  No **If yes, list name used/corporate affiliation:** \_\_\_\_\_

No. of full time employees in Washington: \_\_\_\_\_ Worldwide: \_\_\_\_\_ Year established: \_\_\_\_\_ Referred by: \_\_\_\_\_

**Please select one category:**

**Industry Member** - Any business or organized group of people (“Enterprise”) is eligible to be an Industry Member, provided that it devotes a significant part of its activities in the state of Washington to the creation, development, support or publication of software, digital content, interactive media, Internet or information technology including, without limitation, those who provide custom software development, programming, communications or wireless services (such activities being collectively referred to as the “Information Technology Industry”); provided that the Enterprise is a serious, risk-taking venture. Registration with the State Department of Revenue to pay taxes may be sufficient evidence of such seriousness, and proof of such registration may be required from any applicant for any membership. All employees of each Industry Member shall be entitled to membership benefits.

**Associate** - Any Enterprise (regardless of its location) which supports Washington State’s Information Technology Industry, but does not qualify as an Industry Member or a Community Partner, is eligible to be an Associate Member.

**IT Department** - IT Departments of non-technology companies come under this category. If you qualify as an Industry Member, you are not eligible for this membership. IT Department membership is limited to employees of the IT Department only. A list of eligible employees is required.

**Individual** - Any person (regardless of his/her location) who supports Washington State’s Information Technology Industry is eligible to be an Individual Member. The individual Members will be entitled to such benefits as may be determined by the Board of Directors from time to time.

**Student** - The Student membership level allows any person who is a full-time student at an accredited institution of higher education to qualify as a Student Member. Student Members are treated as Individual Members for all purposes other than discounted dues and other costs or benefits as determined from time to time by the Board of Directors. Student members will not be entitled to vote.

**TAG/ WTIA membership dues below will cover benefits for your company and employees for twelve months.**

**Industry members & IT Departments**

		Associate	
1- 5 Employees	\$313	1-5 Employees	\$406
6-15	\$475	6-15	\$943
16-25	\$805	16-25	\$1,175
26-50	\$1,534	26-50	\$1,887
51-100	\$2,367	50-100	\$2,703
101-500	\$3,988	101-500	\$4,318
501-1000	\$5,574	501-1000	\$5,898
1001+	\$6,977	1001+	\$7,492

**Individual Members**

\$95

**Student Members**

\$70

**To Submit Mail with a Check to:**

WTIA  
 2200 Alaska Way, Ste 390  
 Seattle, WA 98121

**Note the check ‘TAG - Northwest Chapter’**

**Dues are calculated based on the number of full-time employees in Washington State.**

MEMBERSHIP DUES ENCLOSED: \$ \_\_\_\_\_ Based on \_\_\_\_\_ Washington State employees (FTE)

Paid by: VISA MasterCard AMEX Check

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Billing Address for Card: \_\_\_\_\_

**Membership dues are non-refundable upon receipt**