

## TDWI Individual Membership Application

Apply online at [www.tdwi.org/membership](http://www.tdwi.org/membership) or complete this application.

For Team Memberships, please use the Team Membership Agreement form or contact TDWI for additional information.

Your Membership will not be activated until payment is received and will be in effect for one year from the start date.

### STEP 1 TYPE OR PRINT YOUR CONTACT INFORMATION

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

TITLE \_\_\_\_\_

COMPANY OR ORGANIZATION \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

MAILING ADDRESS—LINE 1 \_\_\_\_\_

MAILING ADDRESS—LINE 2 \_\_\_\_\_

CITY STATE ZIP COUNTRY \_\_\_\_\_

TELEPHONE FAX \_\_\_\_\_

E-MAIL (VERY IMPORTANT) \_\_\_\_\_

The contact information you provide will be used only to communicate with you about your TDWI Membership and related TDWI products and services. We value your privacy. For more information about our privacy policy, visit [www.1105media.com/privacy.aspx](http://www.1105media.com/privacy.aspx).

TDWI provides Member publications primarily as electronic documents for download. Members receive e-mail notifications when new Member publications and research are available on [www.tdwi.org](http://www.tdwi.org). Members may opt to receive paper copies (for international Members, there is a \$50 USD annual international shipping surcharge).

I would like to receive my Member publications as paper copies.

### STEP 2 CHAPTER ASSOCIATION (OPTIONAL)

Are you currently associated with a TDWI Chapter? If so, please provide the name of the chapter: \_\_\_\_\_

#### QUESTIONS?

For questions regarding TDWI Membership, contact us at [membership@tdwi.org](mailto:membership@tdwi.org) or 425.226.3053.

### STEP 3 CALCULATE YOUR PAYMENT

ONE-YEAR INDIVIDUAL MEMBERSHIP FEE \$275\*

\* Fee applies to new individual Memberships.

Annual Renewal Fee for existing Members is \$249.

INTERNATIONAL MEMBERS (outside the United States)

I wish to receive hard copy mailings—add \$50 USD  
(annual international shipping surcharge) + \$ \_\_\_\_\_

**› TOTAL \$ \_\_\_\_\_**

### STEP 4 PROVIDE PAYMENT INFORMATION

Check enclosed (payable to TDWI)

Credit card:

American Express

Diners Club

Discover

MasterCard

Visa

CARD NUMBER EXPIRATION DATE \_\_\_\_\_

SIGNATURE FOR CREDIT CARD \_\_\_\_\_

CREDIT CARD BILLING ADDRESS (REQUIRED) \_\_\_\_\_

Please allow 3-4 weeks for processing.

### STEP 5 SUBMIT YOUR APPLICATION

**APPLY ONLINE** at [www.tdwi.org/membership](http://www.tdwi.org/membership), or submit this form:

**E-MAIL** to [membership@tdwi.org](mailto:membership@tdwi.org)

**FAX** to 1.773.829.8330, Attn: TDWI Membership

**MAIL** with full payment to:

TDWI Membership

1201 Monster Road SW, Suite 250

Renton, WA 98057

**CALL** the TDWI Membership line at 425.226.3053