



# MEMBERSHIP APPLICATION

## MEMBERSHIP REQUIREMENTS:

ALL MEMBERSHIP CATEGORIES ARE CORPORATE EXCEPT FOR THE INDIVIDUAL MEMBERSHIP CATEGORY. IF YOU HAVE ANY QUESTION ABOUT YOUR MEMBERSHIP CATEGORY PLEASE CONTACT US.

CATEGORIES (PLEASE SELECT ONLY ONE CATEGORY)

CHECK	COMPANY TYPE	ANNUAL DUES
	<b>MARKETING AND COMMUNICATIONS COMPANIES (BY REVENUE)*</b>	
<input type="checkbox"/>	\$0 - \$2.5 MILLION	\$1,675
<input type="checkbox"/>	\$2.5 - \$5.5 MILLION	\$2,760
<input type="checkbox"/>	\$5.5 - \$10 MILLION	\$5,550
<input type="checkbox"/>	\$10 - \$20 MILLION	\$8,800
<input type="checkbox"/>	\$20+ MILLION	\$11,750
<input type="checkbox"/>	DIGITAL COMPANIES	\$4,400
<input type="checkbox"/>	MAGAZINES	\$4,400
<input type="checkbox"/>	NEWSPAPERS	\$4,400
<input type="checkbox"/>	PRODUCTION/POST PRODUCTION COMPANIES	\$3,300
<input type="checkbox"/>	RESEARCH COMPANIES	\$3,300
<input type="checkbox"/>	RADIO NETWORKS	\$11,750
<input type="checkbox"/>	TV NETWORKS	\$27,500
<input type="checkbox"/>	CABLE NETWORKS	\$6,600
<input type="checkbox"/>	INDIVIDUALS	\$1,100
<input type="checkbox"/>	CLIENTS	\$3,300

\*THIS CATEGORY INCLUDES: ADVERTISING AGENCIES, PR AGENCIES, STRATEGIC CONSULTANTS, EVENT COMPANIES, MEDIA BUYING COMPANIES, CREATIVE & MEDIA BOUTIQUES.

## COMPANY PROFILE:

AGENCY/COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

DATE FOUNDED: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

OWNERSHIP/COMPANY AFFILIATION: \_\_\_\_\_

PERCENTAGE MINORITY OWNED: \_\_\_\_% PARENT COMPANY (IF ANY): \_\_\_\_%

PREVIOUS YEAR CAPITALIZED BILLINGS: \_\_\_\_ (IF APPLICABLE) TOTAL NUMBER OF EMPLOYEES: \_\_\_\_

**PRIMARY CONTACT (VOTING REPRESENTATIVE):**

NAME: \_\_\_\_\_  
 TITLE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

**SERVICES OFFERED:**

ADVERTISING    CREATIVE    DIRECT    EVENTS/EXPERIENTIAL    INTERACTIVE    MEDIA    PROMOTIONS    PUBLIC RELATIONS

OTHER: \_\_\_\_\_

**KEY PERSONNEL:**

1. NAME: _____	TITLE: _____	EMAIL: _____
2. NAME: _____	TITLE: _____	EMAIL: _____
3. NAME: _____	TITLE: _____	EMAIL: _____
4. NAME: _____	TITLE: _____	EMAIL: _____
5. NAME: _____	TITLE: _____	EMAIL: _____
6. NAME: _____	TITLE: _____	EMAIL: _____
7. NAME: _____	TITLE: _____	EMAIL: _____
8. NAME: _____	TITLE: _____	EMAIL: _____
9. NAME: _____	TITLE: _____	EMAIL: _____
10. NAME: _____	TITLE: _____	EMAIL: _____

**OTHER OFFICE LOCATIONS:**

1. CITY: _____	STATE: _____	EMAIL: _____
CONTACT: _____	PHONE: _____	
2. CITY: _____	STATE: _____	EMAIL: _____
CONTACT: _____	PHONE: _____	
3. CITY: _____	STATE: _____	EMAIL: _____
CONTACT: _____	PHONE: _____	

**MAJOR ACCOUNTS (IF APPLICABLE):**

1. _____	CLIENT SINCE: _____
2. _____	CLIENT SINCE: _____
3. _____	CLIENT SINCE: _____
4. _____	CLIENT SINCE: _____
5. _____	CLIENT SINCE: _____
6. _____	CLIENT SINCE: _____
7. _____	CLIENT SINCE: _____
8. _____	CLIENT SINCE: _____
9. _____	CLIENT SINCE: _____
10. _____	CLIENT SINCE: _____



# MEMBERSHIP APPLICATION

## METHOD OF PAYMENT:

CHECK    CREDIT CARD:  AMERICAN EXPRESS    MASTERCARD    VISA

ACCOUNT NUMBER: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

*PAYMENTS TO HISPANIC MARKETING COUNCIL ARE NOT TAX DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES. HOWEVER, THEY MAY BE DEDUCTIBLE AS ORDINARY AND NECESSARY BUSINESS EXPENSES. HISPANIC MARKETING COUNCIL'S FEDERAL TAX ID IS 75-2659688.*

*HISPANIC MARKETING COUNCIL RESERVES THE RIGHT TO REASSIGN A PROSPECTIVE MEMBER TO ANOTHER CATEGORY.*

### PLEASE COMPLETE AND RETURN FORM VIA:

- email to [info@hispanicmarketingcouncil.org](mailto:info@hispanicmarketingcouncil.org) or
- fax to 703-745-5531

FOR OFFICE USE ONLY

DATE RECEIVED: \_\_\_\_\_ AMOUNT PAID: \_\_\_\_\_ DATE PAID: \_\_\_\_\_

PAYMENT METHOD:  CHECK CHECK# \_\_\_\_\_  CREDIT CARD