

Membership Application

NAME _____

TITLE _____

COMPANY _____

ADDRESS _____

CITY _____

STATE/PROV. _____

ZIP / POSTAL CODE _____

PHONE _____

FAX _____

E-MAIL _____

Exhibitor Member Categories

CATEGORY	STATUS	ANNUAL DUES
<input type="checkbox"/> Exhibitor Manager Member (<i>1 individual</i>)	Regular	\$300
<input type="checkbox"/> Join by May 31, 2012	Charter Member	\$275
<input type="checkbox"/> Join by May 31 and attend 2012 Red Diamond Congress	Advocate Member	\$250
<input type="checkbox"/> Exhibitor Corporate Member (<i>up to 3 individuals*</i>)	Regular	\$800
<input type="checkbox"/> Join by May 31, 2012	Charter Member	\$750
<input type="checkbox"/> Join by May 31 and attend 2012 Red Diamond Congress	Advocate Member	\$700
<input type="checkbox"/> Exhibitor Gold Member (<i>up to 10 individuals*</i>)	Regular	\$1500
<input type="checkbox"/> Join by May 31, 2012	Charter Member	\$1250
<input type="checkbox"/> Join by May 31 and attend 2012 Red Diamond Congress	Advocate Member	\$1000

* attach additional names and email addresses on separate sheet of paper

Member Demographics

PRIMARY JOB FUNCTION

- Exhibit/Event Manager/Coordinator
- Sales/Marketing Management
- Executive Management
- Purchasing/Procurement
- Advertising/Promo Management
- Design
- Other

NO. OF PEOPLE WHO PLAN/EXECUTE TRADE SHOWS COMPANY-WIDE

- 1
- 2-5
- 6-9
- 10 or more

ANNUAL TRADE SHOW BUDGET

- up to \$100,000
- \$100,001 to \$250,000
- \$250,001 to \$500,000
- \$500,001 to \$1,000,000
- Over \$1,000,000

ANNUAL TRADE SHOW PARTICIPATION

- 1 to 10 per year
- 11-25
- 26 - 50
- 51-100
- 101 or more

NO. OF PEOPLE WHO PLAN/EXECUTE CORPORATE EVENTS COMPANY-WIDE

- 1
- 2-5
- 6-9
- 10 or more

ANNUAL CORPORATE EVENT BUDGET

- up to \$100,000
- \$100,001 to \$250,000
- \$250,001 to \$500,000
- \$500,001 to \$1,000,000
- Over \$1,000,000

ANNUAL CORPORATE EVENT PARTICIPATION

- 1 to 10 per year
- 11-25
- 26 - 50
- 51-100
- 101 or more

Indicate Your Payment Method *(full payment must accompany this form)*

\$ _____ Check enclosed, payable to EACA Visa AMEX Master Card Discover

TOTAL AMOUNT ENCLOSED _____

CREDIT CARD NO. _____

CVV _____

EXPIRATION DATE _____

SIGNATURE _____

NAME ON CARD _____