

COMPANY MEMBERSHIP APPLICATION

Please complete the application and email to member@same.org

Company Name	
Total Employee Count	This field is required to process the membership
Company Mailing Address	
City, State, Zip	
What is your primary NAICS c Website	oder
Main Phone Number:	
National Dues	umber of employees in the company. If a JV, total number of employees of all companies

Company Size (# of Employees)	1-10 Employees	11-50 Employees	51-100 Employees	101-500 Employees	501-1000 Employees	1001-5000 Employees	5001 + Employees
National Dues	\$325	\$650	\$800	\$950	\$1,200	\$1,450	\$1,700

Post (Chapter) Affiliation

One Post is included with your national membership. Additional Posts may be added for a fee.

Company Size	1-10	11-50	51-100	101-500	501-1000	1001-5000	5001 +
(# of Employees)	Employees						
Post Dues	\$80	\$150	\$225	\$300	\$350	\$350	\$350

Please add these Posts to our Company Membership

1)	\$ 0 (included)
2)	\$
3)	\$
4)	\$
5)	\$
6)	\$

Individual Members

Up to six Individual memberships are included with Company Memberships. Three individual memberships are included for companies with less than 10 employees. Individuals may select any Post, which is included. Each additional Post is \$10.

Prefix/First/Last Name			
Mailing Address			
City, State, Zip			
Position/Title			
Email			
Work Phone			
Mobile Phone			
Post Membership (1 included)			
Additional Posts (\$10 each)			
Young Professional DOB			

Individual Member #2

Prefix/First/Last Name	
Mailing Address	
City, State, Zip	
Position/Title	
Email	
Work Phone	
Mobile Phone	
Post Membership (1 included)	
Additional Posts (\$10 each)	
Young Professional DOB	

Individual Member #3

Prefix/First/Last Name	
Mailing Address	
City, State, Zip	
Position/Title	
Email	
Work Phone	
Mobile Phone	
Post Membership (1 included)	
Additional Posts (\$10 each)	
Young Professional DOB	

Individual Member #4

Prefix/First/Last Name	
Mailing Address	
City, State, Zip	
Position/Title	
Email	
Work Phone	
Mobile Phone	
Post Membership (1 included)	
Additional Posts (\$10 each)	
Young Professional DOB	

Prefix/First/Last Name	
Mailing Address	
City, State, Zip	
Position/Title	
Email	
Work Phone	
Mobile Phone	
Post Membership (1 included)	
Additional Posts (\$10 each)	
Young Professional DOB	
ndividual Member #6	
Prefix/First/Last Name	
Mailing Address	
City, State, Zip	
Position/Title	
Email	
Work Phone	
Mobile Phone	
Post Membership (1 included)	
Additional Posts (\$10 each)	
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Dues:

Company Dues	Number	Rate	\$
Additional Posts Company	#	\$	\$
Additional Individuals (reg)	#	x \$95	\$
Additional Individuals (young)	#	x \$60	\$
Additional Posts Individuals	#	x \$10	\$
Total Dues			\$

Completed applications may be emailed to: member@same.org

SAME - 1420 King Street, Suite 100 - Alexandria, VA 22314 - www.same.org