

## DFW DAMA 2006 Membership Form

Make Checks Payable to: DFW DAMA (Receipts available upon Request)

Mail Completed Membership Form and Check to: DFW DAMA, P.O. Box 702793, Dallas, TX 75370-2793

Send inquiries to: [vp-finance@dfwdama.org](mailto:vp-finance@dfwdama.org)

**New members enrolling before 12/31/2006 will become active members until 12/31/2007.**

**Please fill out the section below for Individual or Student Memberships only** - \*indicates required information

Individual Member \$65.00	Student Member \$35.00	New ____	Renewal ____
* First Name _____ Middle Initial ____			
* Last Name _____			
Company Name _____			
* Address _____			
* City _____		* State _____	* Zip Code _____
* Primary email contact _____		Phone (____) _____ (Work/Personal)	
Current School _____			
<small>(* Required for Student Membership Only)</small>			

**Please fill out the section below for Corporate Memberships only** - \*indicates required information

Corporate Membership \$250.00	New ____	Renewal ____
<ul style="list-style-type: none"><li>- Allows any 5 employees from the company to attend DAMA events.</li><li>- Membership is not associated to named individuals at the company.</li></ul>		
<small>(Check appropriate box for your corporate membership.)</small>		
<input type="checkbox"/>	<b>\$250</b>	<b>1-5 attendees per meeting</b>
<input type="checkbox"/>	<b>\$500</b>	<b>6-10 attendees per meeting</b>
<input type="checkbox"/>	<b>\$750</b>	<b>11-15 attendees per meeting</b>
 <i>The information below relates the Company or Organization:</i>		
* Company or Organization Name _____		
* Address _____		
* City _____		* State _____ * Zip Code _____
Company or Organization Primary Contact Information:		
* Name _____		
* Email _____		
Phone (____) _____		

Note: DFW DAMA is a non-profit organization. Tax Identification Number 84-1668551