



IABCN

Italy-America Business Council & Network

Building Bridges ~ Maintaining Ties ~ Promoting Growth

MEMBERSHIP / SPONSORSHIP APPLICATION Date: _____

Membership Types (annual dues):

Individual \$150 **Non-profit** \$250 **Corporate** \$500 **Sustaining** \$1,000

Sponsorship Types "Festival of the Five Kingdoms":

Re & Regina (King & Queen) \$1,000 **Regno (Kingdom)** \$5,000

Please complete the information below:

INDIVIDUAL

Name _____
Street Address _____
City/State/Zip _____
Tel () _____ Fax () _____ Cell () _____
Email _____

SUSTAINING/CORPORATE/NON-PROFIT

Contact Name _____
Company _____
Title _____
Street Address _____
City/State/Zip _____
Tel () _____ Fax () _____ Cell () _____
Email _____ Web _____
Type of Business or Industry: _____

PAYMENT TYPE:

CHECK IN THE AMOUNT OF THE APPLICABLE DUES MADE PAYABLE TO THE "ITALY AMERICA BUSINESS COUNCIL & NETWORK"

CREDIT CARD TYPE: Visa [] MasterCard or American Express

NAME ON CARD: _____

BILLING ADDRESS (if different from the information above):

CARD NUMBER: _____ **EXPIRY** _____

SECURITY CODE (CVV2) [last 3 digits on reverse side – 4 digits if Amex] _____