



MEMBERSHIP APPLICATION

Date _____

Company, Organization
or Official Entity _____

Member Designee _____
Name Title

Mailing Address _____
Street Address or P.O. Box

_____ City State Zip

Telephone _____ Fax _____

Email Address _____ Website _____

Membership Category _____ Annual Dues \$ _____

.....
Describe your firm's activities _____

Total number of employees (or members, if a membership organization) _____

If your firm is a professional service firm, indicate number of professionals _____

Please answer the next three important questions in detail. (Use additional sheet if needed.)

1) List up to four others in your firm with title and email address to receive FuturePorts meeting announcements, updates and other information.

1. _____

2. _____

3. _____

4. _____

2) For a link from FuturePorts website, provide exact URL and brief description for posting.

3) Referring to FuturePorts' Vision and Mission, what subject areas are the most important to you and what are your top two work item priorities based on your type of business and reasons you joined FuturePorts.

Please return by email or fax to:

Elizabeth Warren
ewarren@futureports.org
phone: 310.982.1323
fax: 877.309.1323