

## Application for Associate Membership

Any incorporated entity, educational institution, association or other group interested in the work of CII may become a non-voting Associate Member upon payment of an annual fee established by the General Membership. Associate Members may not vote, but can attend CII semi-annual meetings (usually held in April and September), other CII events and receive CII publications.

Annual dues for CII members are for the calendar year. Associate Member dues are calculated based on the size of the organization as follows:

Fewer than 5 employees	\$5,000 per calendar year	1 attendee per meeting*
5-25 employees	\$8,000 per calendar year	3 attendees per meeting*
26-2,500 employees	\$12,000 per calendar year	4 attendees per meeting*
More than 2,500 employees	\$15,000 per calendar year	5 attendees per meeting*

\* Attendance caps for all tiers increase by one attendee if the additional attendee votes proxies and/or handles the firm's corporate governance work for portfolio companies.

### Please provide all applicable data for your organization:

Legal name of organization: \_\_\_\_\_

Abbreviated name or acronym (if applicable): \_\_\_\_\_

Number of employees: \_\_\_\_\_ Global assets under management: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Web site: \_\_\_\_\_

Reason for joining CII: \_\_\_\_\_

\_\_\_\_\_

Physical address: \_\_\_\_\_

\_\_\_\_\_

Mailing address (if different than physical): \_\_\_\_\_

\_\_\_\_\_

**Please provide all applicable data for your organization's contacts and mark if they should be included in CII's online directory:**

Please note: there is no limit to the amount of employees that may receive our materials

**Main Organization Representative**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

**Invoicing Representative (if different from main representative)**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

**Proxy Voting Contact (if applicable):**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

**Additional Contact:**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

**Additional Contact:**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

**Additional Contact:**

Name: \_\_\_\_\_ Online Directory: Yes / No

Title: \_\_\_\_\_

Direct phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you agree to receive email correspondence from the association and its members? Yes / No

Mailing address (if different than organization):

\_\_\_\_\_

\*if you would like to add more contacts than this form allows, please include contact details in email along with the completed application.