

Community. Synergy. Solutions.

MEMBERSHIP DUES APPLICATION

Please complete this application and send with a check to Develop Iosco, PO Box 9, East Tawas MI 48730

Name:	
Title:	
Affiliation:	
Address:	
City/State/Zip Code:	
Email address:	
Social Media Address: Facebook:	LinkedIn:
Contact Phone Number:	
1. Membership: □ Board of Directors: \$120 □ Individual: \$50 □ Business: ○ Civic/Non-Profit \$100 ○ Small Business (1 – 9 employees) \$200 ○ Medium Business (10 – 24 employees) \$300 ○ Large Business (more than 25 employees) \$500 □ Government ○ Name of Governmental Entity:	Amount: \$
 2. Sponsorship: to support specific events hosted by Develop Iosco New Year Networking Quarterly Community meetings Annual Meeting Breakfast Website/Social Media DI Winter Market 	Amount: \$
3. Donation: to further support the work of Develop Iosco	Amount: \$
Total Amount to Develop Iosco:	Amount: \$
Signature	Date
Questions? Contact Develop losco at either executivedirector@develop-iosco.org or membership@develop-iosco.org	
DI Processing Information	
Date Received: Date Deposited: Membership Certificate Mailed on:	