



# 2018 New Membership Application

Please send application and payment to:

Membership Department • IFEA World Headquarters • 2603 W. Eastover Terrace  
Boise, ID 83706 • USA Phone: 208-433-0950 ext. 1 • Fax: 208-433-9812



Join the IFEA in June 2018 and Receive \$50, \$100, \$150 or \$200 Off a NEW IFEA Membership. Offer Valid between June 1 to June 31, 2018. (Discount not applicable to Student Memberships.) See <http://www.ifea.com/p/membership/jointheifea-membershipspecials> for more details.

<b>MEMBER #</b>	<b>UNIQUE #</b>

## 1. MAIN MEMBER CONTACT INFORMATION

Organizational Membership - Name of Event/Company: \_\_\_\_\_

Individual or Main Member Contact:  Mr.  Ms.  Mrs \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

City, State/Province, Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_ Website: \_\_\_\_\_

How did you hear about the IFEA? (advertisements, etc.) \_\_\_\_\_

Who recruited you to the IFEA? (Name) \_\_\_\_\_ (Org.) \_\_\_\_\_

With respect to interactions with members/customers or those applying to be members/customers, the IFEA will not cause or allow conditions, procedures, or decisions which are unsafe, undignified, unnecessarily intrusive, or which fail to provide appropriate confidentiality or privacy. If you believe that you have not been accorded a reasonable interpretation of your rights under this policy, please contact the IFEA office at 208-433-0950. When you become a member of the IFEA, you agree to follow the **Code of Ethics and Standards** listed on [www.ifea.com](http://www.ifea.com).

## 2. MEMBERSHIP DUES INFORMATION\*

### Organizational Membership Categories

### Dues Level

All IFEA memberships (unless otherwise noted) may represent just yourself or may include as many individuals within your organization (Staff, Board Chairs, Committee Chairs, etc.) as you'd like. Indicate additional members within your organization on the 2nd page of this application. Please refer to the budget categories below for Organizational Memberships. Dues are based on the total **gross** revenue (income before expenses are paid).

- |                            |   |
|----------------------------|---|
| \$50,000 or less           | <input type="radio"/> <del>\$235</del> NOW \$185 (USD) (\$50 Savings)   |
| \$50,001 to \$250,000      | <input type="radio"/> <del>\$535</del> NOW \$435 (USD) (\$100 Savings)  |
| \$250,001 to \$1.5 Million | <input type="radio"/> <del>\$910</del> NOW \$760 (USD) (\$150 Savings)  |
| Over \$1.5 Million         | <input type="radio"/> <del>\$1150</del> NOW \$950 (USD) (\$200 Savings) |
| Full Time Student Rate     | <input type="radio"/> \$25 (USD)  |

(A copy of your current school year registration receipt is required. This rate is not applicable to educational staff/institutions and can not be associated with an organization.)  
(Student memberships only include one main contact and are not considered group memberships.)

\*Subject to change

## 3. PAYMENT INFORMATION

First Year Administration Fee \$ 50 (USD) \_\_\_\_\_  
Waived for Full Time Student Rate

**MEMBERSHIP DUES:** \$ \_\_\_\_\_

\*A portion of your membership dues goes toward a subscription to IFEA's magazine: "ie" - The Business of International Events.

**TOTAL PAYMENT** \$ \_\_\_\_\_

**Select method of payment:**  VISA  MasterCard  American Express  Discover  Check (make check payable to IFEA in U.S. funds)

Print Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVN Code: \_\_\_\_\_ (MC/Visa-3 digit code back) (AMX-4 digit code front)

Payment is required in full before your application can be processed. Dues are non-refundable. Please allow 2-3 weeks for your membership application to be processed and membership packet to be mailed.

Please send application to: International Festivals & Events Association - 2603 W. Eastover Terrace - Boise - ID - 83706 - U.S.A.  
Phone: +1-208-433-0950 - Fax: +1-208-433-9812 - [www.ifea.com](http://www.ifea.com) - Questions? Contact: [beth@ifea.com](mailto:beth@ifea.com)



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### 3. ADDITIONAL GROUP MEMBERS

Organization: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

All IFEA memberships (unless otherwise noted) are group memberships and may include as many individuals within your organization (Staff, Board Chairs, Committee Chairs, etc.) as you'd like. Please list additional members within your organization here.

Member: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Member: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Member: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Member: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

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Member: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_