SURFACE NAVY ASSOCIATION MEMBERSHIP APPLICATION

MEMBERSHIP TIERS

Any business, corporation, or division of a larger corporation can become a Corporate Member. We offer 5 Tiers of Membership. Below are the 5 tier options with recommended company annual revenue in (). **Select One** Tier I (Under \$40M): 5 Individual Memberships **\$1,150** Tier II (\$40M-100M): 10 Individual Memberships □ \$2,300 Tier III (\$100M-\$1B): 15 Individual Memberships □ \$3,450 Tier IV (\$1B-\$10B): 20 Individual Memberships □ \$5,750 Tier V (Greater than \$10B): 25 Individual Memberships □ \$8,625 **CORPORATION INFORMATION** Company Name (Used as Official Name for all Publications): Street address: Suite/Apt/Building: State: ZIP Code: City: **Company Website:** POINT OF CONTACT INFORMATION Name: Position/Title: Street address: Suite/Apt/Building: City: State: ZIP Code: Phone: Fax: Alternate Email: **Primary Email: CEO/PRESIDENT INFORMATION** Name: Position/Title: Street address: Suite/Apt/Building: City: ZIP Code: State: Phone: Fax: **Primary Email:** Alternate Email:

	SYMPOSIUM CONT.	ACT INFOR	MATION		
Name:				Position/Title):
Street address:				Suite/Apt/Bu	ilding:
City:			State:		ZIP Code:
Phone:		Fax:			
Primary Email:		Alternate Email:			
On the following mail to the follow Email: Mail:	pages please provide information for each membring address with payment: dgarry@navysna.org (payment instructions will be ser Surface Navy Association Attn: Corporate Membership 6564 Loisdale Ct, Ste 318 Springfield, VA 22150				completed please email or
	MEMBER 1 IN	IFORMATIO	N		
Name:				Position/Title):
Street address:				Suite/Apt/Bu	ilding:
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Primary Email:		Alternate Em	ail:		
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Street address:				Suite/Apt/Bu	ilding:
City:			State:		ZIP Code:
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Alternate Email:

Primary Email:

MEMBER 3 IN	IFORMATIO	N				
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Street address:			Suite/Apt/Bu	ilding:		
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Name:			Position/Title) :		
Street address:				Suite/Apt/Building:		
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Phone:	Fax:					
Primary Email:	Alternate Em	ail:				
MEMBER 5 IN	IFORMATIO	N				
Name:			Position/Title) :		
Street address:			Suite/Apt/Building:			
City:		State:		ZIP Code:		
Phone:	Fax:					
Primary Email:	Alternate Em	ail:				

Tier I Ends Here. Continue to the next page if Tier II, III, IV, or V.

MEMBER 6 IN	IFORMATIO	N			
Name:			Position/Title	:	
Street address:			Suite/Apt/Building:		
City:		State:		ZIP Code:	
Phone:	Fax:				
Primary Email:	Alternate Email:				
MEMBER 7 IN	IFORMATIO	N			
Name:			Position/Title	:	
Street address:			Suite/Apt/Bui	llding:	
City:		State:		ZIP Code:	
Phone:	Fax:				
Primary Email:	Alternate Email:				
MEMBER 8 IN	IFORMATIO	N			
MEMBER 8 IN	IFORMATIO	N	Position/Title	:	
	IFORMATIO	N	Position/Title		
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Name: Street address: City: Phone: Primary Email: MEMBER 9 IN	Fax:	State:	Suite/Apt/Bu	Ilding: ZIP Code:	
Name: Street address: City: Phone: Primary Email: MEMBER 9 IN	Fax:	State:	Suite/Apt/Bui	Ilding: ZIP Code:	
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Name:			Position/Title) :		
Street address:			Suite/Apt/Bu	ilding:		
City:		State:		ZIP Code:		
Phone:	Fax:					
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Tier II Ends Here. Continue if Tier III, IV, or V						
MEMBER 11 I	NFORMATIC	N				
Name:			Position/Title):		
Street address:			Suite/Apt/Bu	ilding:		
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MEMBER 12 I	NFORMATIC	N				
Name:			Position/Title):		
Street address:			Suite/Apt/Bu	ilding:		
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City: Phone: Primary Email: MEMBER 13 I Name:	Alternate Em	ail:	Position/Title	ZIP Code:		
City: Phone: Primary Email: MEMBER 13 I Name: Street address:	Alternate Em	ail:	Position/Title	ZIP Code:		

MEMBER 10 INFORMATION

MEMBER 14 II	NFORMATIC	N		
Name:			Position/Title):
Street address:			Suite/Apt/Building:	
City:		State:	1	ZIP Code:
Phone:	Fax:			
Primary Email:	Alternate Email:			
MEMBER 15 II	NEORMATIC	N		
Name:		71 1	Position/Title) :
Street address:			Suite/Apt/Bu	ilding:
City:	y: State			ZIP Code:
Phone:	Fax:			
Primary Email: Alternate Email:				
Tier III Ends Here. Continue if Tier IV or V.				
MEMBER 16 II	NFORMATIC	ON		
Name:			Position/Title) :
Street address:			Suite/Apt/Bu	ilding:
City:		State:		ZIP Code:
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Primary Email:	Alternate Em	ail:		
MEMBER 17 II	NFORMATIC	ON		
Name:			Position/Title) :
Street address:			Suite/Apt/Bu	ilding:
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MEMBER 18 II	NFORMATIC	ON			
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MEMBER 19 II	NFORMATIC	ON			
Name:			Position/Title) :	
Street address:				ilding:	
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MEMBER 20 II	NFORMATIC	N			
Name:			Position/Title) :	
Street address:			Suite/Apt/Building:		
City:				ZIP Code:	
Phone:	Fax:				
Primary Email:	Alternate Email:				
Tier IV Ends Here. Continue if Tier V.					

MEMBER 21 I	NFORMATIC	N		
Name:			Position/Title	9 :
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MEMBER 22 I	NFORMATIC	ON			
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Street address:			Suite/Apt/Building:		
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MEMBER 23 I	NFORMATIO	N			
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Street address:			Suite/Apt/Bui	lding:	
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Phone:	Fax:				
Primary Email:	Alternate Email:				
MEMBER 24 I	NFORMATIO	DN			
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Name:	NFORMATIO	State:			
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Name: Street address: City:		State:		lding:	
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Name: Street address: City: Phone: Primary Email: MEMBER 25 I	Fax:	State:	Suite/Apt/Bu	Iding: ZIP Code:	
Name: Street address: City: Phone: Primary Email: MEMBER 25 I Name:	Fax:	State:	Suite/Apt/Bui	Iding: ZIP Code:	
Name: Street address: City: Phone: Primary Email: MEMBER 25 I Name: Street address:	Fax:	State:	Suite/Apt/Bui	Iding: ZIP Code: :	