

# New Member Checklist and Agreement

Today's Date \_\_\_\_\_

## Organization Information

Business Name \_\_\_\_\_  
(this is how your company will be displayed online or in print)

Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
(if different from physical address)

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
(if different from physical address)

County \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ Website Address \_\_\_\_\_

Product/Service Category \_\_\_\_\_

(Four words or less for directory placement. For example: real estate sales, restaurant, manufacturer, office supplies, etc.)

# of Full-time Employees \_\_\_\_\_ # of Part-Time Employees \_\_\_\_\_

## Main Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

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

## Additional Contacts

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Title \_\_\_\_\_

E-mail \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Title \_\_\_\_\_

E-mail \_\_\_\_\_

**Help us help you!** Our goal of having a more diverse and inclusive membership begins with identifying those businesses that feel marginalized. Let us know who you are so we may be able to better assist you.

## My company is

- \_\_\_\_\_ Minority-Owned
- \_\_\_\_\_ Woman-Owned
- \_\_\_\_\_ Veteran-Owned
- \_\_\_\_\_ LGBTQ-Owned
- \_\_\_\_\_ None of the above

\_\_\_\_\_ I agree to allow 1si to contact me and/or our company representative(s) by e-mail, fax, or phone.

## Three easy ways to become a member:

- Mail a completed application and check to 4100 Charlestown Road, New Albany, IN 47150
- Go to 1si.org and click JOIN
- Call 812.945.0266 if you have questions



4100 Charlestown Road  
 New Albany, IN 47150  
 p. 812.945.0266  
 f. 812.948-4664  
 www.1si.org



## Choose Your Package

- Classic - \$490 \_\_\_\_\_
- Nonprofit - \$350 \_\_\_\_\_
- Retired Executive - \$189 \_\_\_\_\_
- Associate - \$189 \_\_\_\_\_
- Elite - \$800 \_\_\_\_\_
- Regional Advantage - \$1,600 \_\_\_\_\_
- MMA - \$1,800 \_\_\_\_\_
- Premier - \$2,770 \_\_\_\_\_
- + application fee - \$25
- TOTAL DUE: \$ \_\_\_\_\_**

- Sign me up for Automatic Recurring Billing (ARB)! Memberships are a 12-month commitment. I want to pay my membership:
- Monthly  Quarterly  Semi-annually  Annually

Charge my  VISA  Mastercard  American Express  Discover

Card Number.....

Expiration Date ..... CVV or CID Code.....(3 or 4-digit code listed on card)

Name as it appears on card .....

Signature .....

Billing address of card .....

One Southern Indiana does not store credit card, debit card or banking information



# Membership Application

## Our Mission

To help businesses thrive in the Southern Indiana and Louisville Metro area



## Our Vision

That our Southern Indiana region will be economically strong, and all businesses will flourish, providing viable jobs, prosperity, and quality of place



4100 Charlestown Road  
 New Albany, IN 47150  
 812.945.0266

