



The Tax Technology Association

# Membership Application

Membership Type (check one):  Regular  Associate

Please complete one application per address location. Photocopy as necessary.

Company Name: \_\_\_\_\_

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

City, State Zip: \_\_\_\_\_

### Primary Contact Information

Name: \_\_\_\_\_ Mail Stop/Room #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### Additional Individuals

Name: \_\_\_\_\_ Mail Stop/Room #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Mail Stop/Room #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Mail Stop/Room #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### Amount Due

Regular members pay \$450 per legal entity. \$450.00 due

Associate members pay \$175 per person. # of individuals \_\_\_\_\_ X \$175 = \$\_\_\_\_\_ due

### Payment Method

Enclosed is my check for \$\_\_\_\_\_. Make check payable to: Association for Computers & Taxation  
Mail to: ACT, P.O. Box 1093, Warwick, NY 10990

Charge my credit card for \$\_\_\_\_\_. Card type:  Visa  MC  Amex  Discover  Diners Club

Card # \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_ (please type or print clearly)

Cardholder's name: \_\_\_\_\_ Signature: \_\_\_\_\_

### How did you hear about ACT?

Internet  Vendor  Client  Ad  Mail  Other \_\_\_\_\_