



# Membership Application

Join ISM-Milwaukee & the Institute for Supply Management (ISM) by filling out this application, or join online at [www.ismmilwaukee.org](http://www.ismmilwaukee.org)

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

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

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

Please check preferred mailing address:  Business  Home

## Business

Company \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Fax \_\_\_\_\_

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

## Home

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

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

## Other

Are you a C.P.M.?  Yes  No

Do you hold other professional designations? If so, please list: \_\_\_\_\_

Education (check highest level completed):

High School  Associate's  Bachelor's  Master's  Other: \_\_\_\_\_  Student: \_\_\_\_\_ (graduation date)

Who referred you to ISM-Milwaukee? \_\_\_\_\_

Date of Birth (optional): \_\_\_\_/\_\_\_\_/\_\_\_\_

Industry SIC Code: \_\_\_\_\_

Would you like to serve on a Committee? \_\_\_\_\_

Number of Employees at your Location (please check one):  under 100  100 - 249  250 - 499  500 - 999  1,000+

## Payment — Dues are \$295 the first year and \$275 each year there-after

Enclosed is a check for \_\_\_\_\_ payable to *ISM-Milwaukee*

Charge my: (circle one) **Visa / Mastercard** Card No. \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Customer Code (3-digits): \_\_\_\_\_

ISM Members receive *Inside Supply Management*® magazine as a \$12 portion of the national membership fee. I agree to abide by the *ISM Bylaws, Principles and Standards of Ethical Supply Management Conduct*, and *Statement of Antitrust Policy* (available at [www.ism.ws](http://www.ism.ws)).

Signature \_\_\_\_\_ Date \_\_\_\_\_