

# APPLICATION FOR ASSOCIATE MEMBERSHIP



Please return completed application to the IAA via email: [join@investmentadviser.org](mailto:join@investmentadviser.org); fax: (202) 293-4223; or mail: IAA, 1050 17th Street NW, Suite 725, Washington, DC 20036-5514. Payment may be submitted with application, but it is not a requirement for submission. Your firm will be invoiced after receipt of application.  
*Membership does not and may not be used to imply IAA endorsement of any firm, products, services, or personnel.*

## Firm Contact Information - PLEASE PRINT OR TYPE ALL RESPONSES

Firm Name	Acronym	
Mailing Address	Suite/Floor Number	City, State & Zip Code +4
Telephone Number	Fax Number	Website

## Required Information - Firm Eligibility and Referral Information

- Type of business: \_\_\_\_\_
- Category on IAA *Service Provider Directory* (if applicable): \_\_\_\_\_
- Is your firm currently registered as an investment adviser with the Securities and Exchange Commission (SEC)?  
 Yes  No ("No" is required for Associate Membership status)
- How did you discover the IAA? \_\_\_\_\_

## Firm Staff Information

Individuals may edit their email preferences online at any time on the "My Profile" page at [www.investmentadviser.org](http://www.investmentadviser.org).

### "Primary Contact" to the IAA for official matters and notices

Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name	
Title/Position					Email Address
Telephone Number	Fax Number	Address (if different from firm mailing address)			

### "Secondary Contact" to the IAA for official matters and notices

Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name	
Title/Position					Email Address
Telephone Number	Fax Number	Address (if different from firm mailing address)			

### "Client/Business Contact" will serve as the contact for interested clients (same person as primary or secondary contact)

Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name	
Title/Position					Email Address
Telephone Number	Fax Number	Address (if different from firm mailing address)			

### "Billing Contact" for membership dues invoices (same person as primary or secondary contact)

Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name	
Title/Position					Email Address
Telephone Number	Fax Number	Address (if different from firm mailing address)			

Application Continues



**Additional firm staff to receive associate member benefits**

Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
Title/Position			Email Address	
Telephone Number	Fax Number	Address (if different from firm mailing address)		

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Mr.  Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
Title/Position			Email Address	
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**Organization/Firm Description & Logo**

1. Firm description (400 character maximum):

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2. If desired, please email a high-resolution jpg logo file to [join@investmentadviser.org](mailto:join@investmentadviser.org). Note that the IAA will resize, compress, and/or convert your logo to display on our website.

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<p>Your firm's IAA associate membership will allow an unlimited number of its employees to receive IAA associate member benefits. If you have any questions, please contact the IAA office at (202) 293-4222. Please attach additional pages to add more firm staff. Thank you!</p>
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