



Membership Agreement Form

Name of Member Company: _____

ACKNOWLEDGEMENT: As a DCIA Member, I acknowledge the obligations of my Company to remain current at all times with dues payments and that Memberships automatically renew for successive terms absent prior written notice. Moreover, I hereby acknowledge that my Company shall be bound by the Articles of Incorporation and the Bylaws of the DCIA.

Name of Signer: _____

Position Title within Member Company: _____

Signature

Date

Please fax (410-643-3585) or mail your agreement to:



**DCIA Member Services
2838 Cox Neck Road
Suite 200
Chester, MD 21619**

You may also e-mail an electronic copy to: join@dcia.info

Membership Approval:

Please complete all requested information, sign, and mail this document along with check or money order for initiation fee and initial dues payment to Member Services, DCIA, 2838 Cox Neck Road, Suite 200, Chester, MD 21619. This form may also be sent via fax to (410-643-3585) or e-mail (join@dcia.info). If you prefer to pay your dues via electronic transfer, please contact DCIA at 410-476-7965 for ABA routing and account information.

Dues are based on DCIA Membership Level selected by applicant subject to DCIA approval. Dues are payable by check, money order, or electronic transfer and must accompany the Membership Agreement. This dues payment is not deductible as a charitable contribution. However, for most Members this fee is deductible as a business expense. Please note that up to 25 percent of Member dues may be used for lobbying expenses on behalf of the Members. Membership terms are for one year. Renewals are automatic for successive annual terms unless prior written notice is given. Benefits vest upon DCIA's receipt of first dues payment.