



## 2018 **Business Associate** Membership Application

Navy League Business Associate Membership dues are \$2,000 annually

### Company Profile

Brief description of company products/services:

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Number of Employees: \_\_\_\_\_

Annual Revenue: \_\_\_\_\_

Name of parent company (if applicable) \_\_\_\_\_

Are you interested in exhibiting at the Sea-Air-Space Exposition? \_\_\_\_\_

Were you sponsored by a local Navy League Council? Yes No

If Yes, what is the name of the Council? \_\_\_\_\_

Additional Notes:

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If you need assistance in filling out this form, or if you have any questions about Corporate Membership, please contact the Office of Corporate Affairs at:

Leticia Click

Director of Corporate Affairs

Navy League of the United States

Phone: (703) 312-1570

Fax: (703) 528-2333

**CONTACTS**

**CEO REPRESENTATIVE:**

CEO or President (or their representative) will receive correspondence from the National President of the Navy League and will be invited to special events exclusively for CEOs:

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

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

Mailing Address

*Check here if it is the same as the company address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**MEMBERSHIP REPRESENTATIVE:**

Person who will serve as a membership representative and handle membership invoices and correspondence:

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

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

Mailing Address

*Check here if it is the same as the company address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**DC REPRESENTATIVE:**

Person who will serve as the Washington, DC representative and distribute information on local events:

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

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

Mailing Address

*Check here if it is the same as the company address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**ADVERTISING REPRESENTATIVE:**

Person who is authorized to place advertising for our firm:

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

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

Mailing Address

*Check here if it is the same as the company address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**PUBLIC RELATIONS/MARKETING REPRESENTATIVE:**

Person who is contacted for company information and sponsorship opportunities:

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

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

Mailing Address

Check here if it is the same as the company address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**The persons listed above must be re-listed under Membership Information (see page 4) in order to become Navy League members. Otherwise, the individuals listed above will be stored as “non-member representatives” on your membership profile.**

**MEMBERSHIP INFORMATION**

The following are to be members of the Navy League through this Business Associate Membership. All will receive membership benefits, *SEAPOWER* Magazine and other Navy League publications. Names of regular members may be changed with annual membership renewal. **If you would like the people listed as CONTACTS to receive a Navy League Membership, you must list them below.**

**\*NOTE\***

*Please indicate which council the following new members would like to be assigned. For a full list of councils, please visit [www.navyleague.org/membership/locator.html](http://www.navyleague.org/membership/locator.html)*

(1) Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
 *Check here if it is the same as the company address*

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Desired Council Assignment: \_\_\_\_\_

(2) Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
 *Check here if it is the same as the company address*

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Desired Council Assignment: \_\_\_\_\_

(3) Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
 *Check here if it is the same as the company address*

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Desired Council Assignment: \_\_\_\_\_

(4) Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
 *Check here if it is the same as the company address*

\_\_\_\_\_

Email address:

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Desired Council Assignment: \_\_\_\_\_

(5) Name: \_\_\_\_\_

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

Address:

*Check here if it is the same as the company address*

\_\_\_\_\_  
\_\_\_\_\_

Email address:

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Desired Council Assignment: \_\_\_\_\_

**Additional names for regular membership may be added by contacting us. Please include \$55 annual dues for each additional name.**