

MEMBERSHIP APPLICATION

International Music Software Trade Association



COMPANY NAME: _____ ESTABLISHED(YEAR): _____

PRIMARY CONTACT: _____ NO. OF EMPLOYEES: _____

BUSINESS ADDRESS: _____ CITY: _____

STATE: _____ COUNTRY: _____ POSTAL CODE: _____

TEL: _____ FAX: _____ EMAIL: _____

URL: _____

CATEGORY:	ANNUAL SALES				MAIN PRODUCTS
	up to \$99,999	\$100,000+	\$1,000,000+	\$10,000,000+	
<input type="checkbox"/> MANUFACTURER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> DISTRIBUTOR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> RETAILER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> REP FIRM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

PAYMENT INFORMATION:	NUMBER OF EMPLOYEES [ANNUAL DUES]			
MANUFACTURER	<input type="checkbox"/> 1-9 [\$250]	<input type="checkbox"/> 10-49 [\$1,000]	<input type="checkbox"/> 50-499 [\$2,500]	<input type="checkbox"/> 500+ [\$10,000]
DISTRIBUTOR	<input type="checkbox"/> 1-9 [\$250]	<input type="checkbox"/> 10-49 [\$500]	<input type="checkbox"/> 50-499 [[\$1,000]	<input type="checkbox"/> 500+ [\$2,500]
REP FIRM	<input type="checkbox"/> 1-9 [\$250]	<input type="checkbox"/> 10-49 [\$500]	<input type="checkbox"/> 50-499 [[\$1,000]	<input type="checkbox"/> 500+ [\$2,500]
RETAILER	<input type="checkbox"/> 1-9 [\$100]	<input type="checkbox"/> 10-49 [\$250]	<input type="checkbox"/> 50-499 [[\$500]	<input type="checkbox"/> 500+ [\$2,500]

PAYMENT OPTIONS: VISA MASTERCARD CHECK BANK TRANSFER

CREDIT CARD NUMBER: _____ EXPIRY DATE: _____ CHECK NO.: _____

CARD HOLDER NAME: _____ CARD HOLDER SIGNATURE: _____

Membership Year: 20_____

AUTOMATICALLY RENEW MY MEMBERSHIP EVERY YEAR .

I represent that I am able and authorized to submit the above company for membership in IMSTA.

AUTHORIZED SIGNATURE: _____ Date: _____

IMSTA ACTIVITY SCHEDULE

1. Exhibit at Anaheim Winter NAMM	2. Exhibit at Frankfurt Musik Messe	3. Exhibit at MIAC	4. Exhibit at AES
5. Build Alliances with MI Trade Shows	6. Compute music software piracy rate	7. Implement Annual Piracy Survey	8. Find Artist Endorsees
9. Organize IMSTA FESTA in Major Markets	10. Develop Piracy Free Zones	11. Increase compliance with Industry Member Guide	

WHAT YOU SHOULD DO RIGHT AFTER SIGNING UP

1. Add the IMSTA Badge to your website	2. Implement a "No Cracks" policy	3. Add slogan to your email signature	4. Contribute ideas
5. Encourage your customers to join			

The International Music Software Trade Association

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Fax: 416 789-1667

www.imsta.org

RETURN THIS APPLICATION BY FAX TO: 416 789-1667