



# ACCT MEMBERSHIP APPLICATION FORM

Check if new membership       Check if renewal – Membership Number \_\_\_\_\_

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State/Prov \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

To access parts of the ACCT website, you will need a user name and password. Create one here:

User Name \_\_\_\_\_ Password \_\_\_\_\_

## MEMBERSHIP FEES (Check appropriate option)

**Associate Membership**

\$75 USD

Membership period – 12 months. Open to any interested individual or organization.

Associate members receive one copy of the Standards, Parallel Lines (issued three times a year), discount for one registrant at the annual conference and access to ACCT sponsored insurance coverage for Challenge Course Programs.

**Institutional Membership**

\$250 USD

Same benefits as Level 1, receives 4 copies of printed materials and 4 conference discounts

## PAYMENT OPTIONS (check method of payment)

Check    Money Order    Credit Card (Mastercard, Visa, AmEx only)    Purchase Order (US only)

Check or Money Order Information – make payable to ACCT in US Dollars

Credit Card Information:  MasterCard    Visa    American Express

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Print Name on Card \_\_\_\_\_

Credit Card Security Code (on back of MC/Visa, on front of AmEx) \_\_\_\_\_

Purchase Order Information (US only) PO # \_\_\_\_\_ (include copy of P0)

**Please remit in US funds** to ACCT, P. O. Box 47, Deerfield, IL 60015 USA, or fax to +1-847-325-5864.

Questions? Call +1-847-325-5860 or email [info@acctinfo.org](mailto:info@acctinfo.org) or visit [www.acctinfo.org](http://www.acctinfo.org)

**For US taxpayers:** ACCT dues may be deductible as a business expense, please check with your tax advisor. A portion of the dues may be used for lobbying purposes each year, contact the ACCT office for details.