

- YES! I am serious about my career and wish to become a DMAW member at the annual dues of \$215.**
- YES! I am serious about my career and wish to become a DMAW *NonProfit* member at the annual dues of \$160.**
- YES! I am serious about my career and want to take advantage of the \$40 savings and wish to begin my membership in DMAW for *TWO YEARS* for just \$390!**

**STEP #1 - INITIAL MEMBER PROFILE**

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Email \_\_\_\_\_

Facebook URL \_\_\_\_\_ LinkedIn URL \_\_\_\_\_ Twitter \_\_\_\_\_

**STEP #2 – PAYMENT INFORMATION (Federal ID #23-7357093)**

**Check enclosed made payable to DMAW or Charge my:**  Visa  MasterCard  AMEX

SIGNATURE is required \_\_\_\_\_ Print Cardholder Name (as it appears on the card) \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

**STEP #3 – Company Type**

- Use the categories shown below to choose your **Company Type**. Select as many types as necessary.
- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Agency-2-15             | <input type="checkbox"/> Agency-16-50        | <input type="checkbox"/> Agency-51+           | <input type="checkbox"/> Association         |
| <input type="checkbox"/> Caging/Lockbox Firm     | <input type="checkbox"/> Cataloger           | <input type="checkbox"/> Data Management Firm | <input type="checkbox"/> Digital             |
| <input type="checkbox"/> Educational Institution | <input type="checkbox"/> Fulfillment Company | <input type="checkbox"/> Lettershop/Mailshop  | <input type="checkbox"/> List Mgmt/Brokerage |
| <input type="checkbox"/> Nonprofit: Political    | <input type="checkbox"/> Nonprofit: Other    | <input type="checkbox"/> Premium Supplier     | <input type="checkbox"/> Printer             |
| <input type="checkbox"/> Sole Proprietorship     | <input type="checkbox"/> Telemarketing Firm  |   |  |
- Other, please specify: \_\_\_\_\_

**STEP #4 – Firm Focus**

- Please select all **areas of interest**:
- Nonprofit  Consumer  Government  For Profit/Commercial

**STEP #5 – Job Function**

- Please select the category listed below which best describes **your Job Function**.
- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Account Services           | <input type="checkbox"/> Business Strategist/Development | <input type="checkbox"/> Copywriter/Editor  | <input type="checkbox"/> Creative Design        |
| <input type="checkbox"/> Customer Service Rep       | <input type="checkbox"/> Data Analysis                   | <input type="checkbox"/> DRTV/Radio         | <input type="checkbox"/> Email Marketing        |
| <input type="checkbox"/> Finance/Banking/Accounting | <input type="checkbox"/> General Management              | <input type="checkbox"/> Government Affairs | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> List Manager/Broker        | <input type="checkbox"/> Marketing Communications        | <input type="checkbox"/> Marketing Officer  | <input type="checkbox"/> Mobile Marketing       |
| <input type="checkbox"/> Online Media               | <input type="checkbox"/> Product/Brand Mgmt              | <input type="checkbox"/> Production-Print   | <input type="checkbox"/> Project Management     |
| <input type="checkbox"/> Research                   | <input type="checkbox"/> Sales                           | <input type="checkbox"/> SEO/SEM            | <input type="checkbox"/> Social Media           |
| <input type="checkbox"/> Telemarketing Services     | <input type="checkbox"/> Web Development                 |   |   |
- Other, please specify: \_\_\_\_\_

**STEP #6 – Send completed application with payment to:**

**DIRECT MARKETING ASSOCIATION OF WASHINGTON**  
 11709 Bowman Green Drive, Reston VA 20190-3501  
 Phone: 703-689-DMAW (3629) • FAX: 703-481-3629