

MEMBERSHIP APPLICATION



Member Information

Please provide the information as you would like it to appear in the directory.

FULL NAME _____

COMPANY _____

ADDRESS _____

CITY _____ STATE/PROVINCE _____

ZIP/MAIL CODE _____ COUNTRY _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

DESIGNATIONS OR CERTIFICATIONS (check all that apply)

CBI M&AMI CEMA CSBA Other

PRIMARY ROLE IN THE TRANSACTIONS PROCESS (check all that apply)

Intermediary Attorney CPA Advisor PEG Other

TELL US ABOUT YOUR PRACTICE SIZE (check one)

Sole Practitioner 2-5 5-10 Over 10

DO YOU SPECIALIZE IN AN INDUSTRY? (if yes, please specify) _____

WHOM MAY WE THANK FOR REFERRING YOU? _____

Information provided will be used to update your profile on The M&A Source website.

Annual Dues

Memberships are for a calendar year and will expire on 12/31 of each year.

M&A Source Membership Only \$495 \$ _____

M&A Source & IBBA Membership \$844* _____

*\$100 discount for belonging to both organizations

CBI Recertification Fee \$55 _____

M&AMI Recertification Fee \$55 _____

TOTAL TO BE BILLED/CHARGED \$ _____

Payment Information

Please invoice me Check Visa Mastercard American Express

CARDHOLDER NAME _____ AMOUNT _____

ACCOUNT NUMBER _____ EXP. DATE (MM/YY) _____

SIGNATURE _____

If you have a membership or billing question, contact The M&A Source Headquarters at 312-321-5112.

Mail, fax, or email this application to:

The M&A Source Headquarters • 8305 Solutions Circle • Chicago, IL 60677-8003

FAX 312.673.6599 • EMAIL admin@masource.org