



Enrollment Form

Company _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Web Site URL _____

- | | |
|---|----------|
| <input type="checkbox"/> Titanium Partnership | \$22,000 |
| <input type="checkbox"/> Diamond Partnership | \$11,000 |
| <input type="checkbox"/> Platinum Partnership | \$7,800 |
| <input type="checkbox"/> Gold Partnership | \$4,200 |
| <input type="checkbox"/> Emerald Partnership | \$3,000 |
| <input type="checkbox"/> Silver Partnership | \$1,800 |
| <input type="checkbox"/> Bronze Partnership | \$500 |

Please email your company logo in JPG or GIF (highest resolution possible) to AOSgood@the-dma.org. Thank you for your support!

Please charge my: Visa MasterCard American Express Discover

Card Number: _____

Expires: _____

Signature: _____

Please do not email credit card information, instead fax to **202.628.4383**, attention Alicia Osgood. If paying by check, please mail your check to the address on this enrollment form.

DMA Nonprofit Federation Federal Tax ID Number: 13-1810859

Dues and other contributions to the DMA Nonprofit Federation are not tax deductible as a charitable contribution for income tax purposes. However, they may be deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of lobbying activities.

1615 L St., NW — Suite 1100 — Washington, DC 20036
Fax: 202.628.4383 — Email: nonprofitfederation@the-dma.org