MEMBERSHIP APPLICATION

CAMPAIGN CODE:

MEMBER INFORMATION

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr.

First Name _____ Middle _____ Last _____

Designation: ☐ CMP ☐ CMM ☐ HMCC ☐ Other _____ Job Title _____

Company Name _____

Who referred you? _____

Chapter Affiliation _____

(Applicable for Preferred and Premier Memberships only)

Graduation Year (If applying for Student Membership) _____

Member Type

☐ Planner ☐ Supplier
☐ Faculty ☐ Student

Membership Level

☐ Premier
☐ Preferred
☐ Essential

How did you hear about us? _____

CONTACT INFORMATION

Please enter your preferred mailing address: ☐ Home ☐ Work

Street Address _____ Apt/Suite/Office _____

City/Town _____ State/Province _____ Zip/Postal _____ Country _____

Email _____

Phone: ☐ Home ☐ Mobile _____ Work _____

PAYMENT INFORMATION

☐ Check Enclosed ☐ MasterCard ☐ Visa ☐ American Express ☐ Discover ☐ Send Invoice

Name on Card _____

Card Number _____ Exp. Date _____ CVV Number _____

State/Province _____ Zip/Postal _____

Total Amount _____ Signature _____ Date _____

☐ Check this box if you would like to be automatically renewed using this credit card when membership expires.

Bank - Wire Transfer

Meeting Professionals International (Tax ID: 23-7256168)

Account Number: 2036630 • Bank Routing for ACH/Wire Transfers: 111025877 • International SWIFT: TESYUS41

Name of Bank: Texas Security Bank, 1212 Turtle Creek Blvd., Dallas, TX 75207

ACKNOWLEDGMENT

All information provided in this application is complete and correct to the best of my knowledge and belief and if additional information is needed, I will supply it. I shall conduct my activities in accordance with the Bylaws, Policies and Procedures, and Principals of Professionalism of MPI as they are now or amended in the future. I waive and release all claims, demands and actions that I now or may in the future have against MPI, its officers, directors, members, agents, employees and chapters for any act or omission, in granting or denying membership in MPI or in censoring, suspending, expelling, or terminating my membership in MPI. I agree to allow my contact information to be included in all MPI marketing preference lists. If I am using a credit card, I authorize MPI to process such request in accordance with the appropriate credit card rules and regulations governing it.

Signature required _____

Print name _____

Date _____

SEND MEMBERSHIP APPLICATION WITH PAYMENT TO:

Meeting Professionals International
PO Box 226308 • Dallas, TX 75222-6308
Tel 972-702-3030
Web www.mpi.org **Email** feedback@mpi.org

Membership Benefits

	« Essential »	« Preferred »	« Premier »
550+ hours of free on-demand professional development	●	●	●
Member rate for MPI Signature Events	●	●	●
Full access to the MPI Community Forums	●	●	●
Member Directory listing and access	●	●	●
Early access to select job listings in the Career Center	●	●	●
Subscription to MPI Weekly Newsletters and The Meeting Professional®	●	●	●
Access to MPI Industry Research	●	●	●
Free internship postings in the MPI Career Center	●	●	●
Free digital access to content from Word Education Congress (WEC)	●	●	●
Access to exclusive scholarships from the MPI Foundation	●	●	●
Opportunities to volunteer at the local and/or international level	●	●	●
Listing in the Global Marketplace *	●	●	●
Affiliation with one of MPI's 70+ Chapters and Clubs around the world		●	●
Discount at Chapter Events		●	●
VIP Access at MPI Signature Events **			●
Additional 10% discount on select Academy programs (CMM and CMP excluded)			●
Additional 10% discount on MPI Signature Events			●
Advanced reservations to the Career Collective at WEC **			●

**Suppliers Only*

***When Available*

Membership Pricing

MPI offers tiered, global membership pricing.
Please contact Member Services for pricing in your area.

Visit **mpi.org/join**
Call 1.972.702.3030 or 1.866.318.2743
Email **feedback@mpi.org**

For full benefits and pricing, visit **mpi.org/join**

New members pay a one-time $50/€50 application fee.