# Institutional Locksmiths' Association

*The "In-House Locksmith" Association*
*http://www.ilanational.org*

## Corporate Membership Application

| Corporation/Business Information | | |
|---|---|---|
| **Name of Corporation:** | | |
| **Address:** | | |
| | | |
| **City:** | **State:** | **Zip:** |
| **Phone:** | **E-mail:** | |

| President or Designee | | |
|---|---|---|
| **Last Name:** | **First Name:** | **Middle Name/Initial:** |
| **Job Title:** | **Certification(s):** | |
| **Address(if different than above):** | | |
| | | |
| **City:** | **State:** | **Zip:** |
| **Phone:** | **E-mail:** | |

| Divisions or Sub-Groups Included Under Parent Corporation Application |
|---|
| |
| |
| |
| |
| |

| Membership (Please check one) | |
|---|---|
| **Corporate (up to $5 million annual gross sales)** | **$ 300.00 per year** |
| **Corporate ($5-15 million annual gross sales)** | **$ 700.00 per year** |
| **Corporate (over $15 million annual gross sales)** | **$1,000.00 per year** |
| *If membership is held by the parent company of multi-division group, rates will be adjusted to include all divisions.* | |
| *Officers, Representatives, Sales Associates or other Employees may apply for a Corporate Individual Membership at the regular membership rate.* | |

| | | |
|---|---|---|
| | **Membership Fee: (Please fill in amount from above)** | **$** |
| | **Other Funds (Corporate Individual Application(s), etc.):** | **$** |
| **Make check payable to: Institutional Locksmiths' Association** | **Total Amount Enclosed (Do Not Send Cash)** | **$** |

**Sent form and payment to:**
**Institutional Locksmiths' Association**
**PO Box 1459**
**New York, NY 10159-1459**

**Authorized Signature:**

**For ILA Use Only:**