



# Association of State Floodplain Managers

575 D'Onofrio Dr., Ste. 200, Madison, WI 53719 | 608-828-3000 | [www.floods.org](http://www.floods.org) | [memberhelp@floods.org](mailto:memberhelp@floods.org)

## MEDIUM CORPORATE PARTNER APPLICATION (11-100 Employees) - 2018

CORPORATION \_\_\_\_\_ CHECK ONE:  NEW  RENEWAL

OFFICE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

OFFICE PHONE \_\_\_\_\_ WEBSITE: \_\_\_\_\_

### Primary Discipline (select one):

- Administrative/Management
- Emergency Management
- Engineering
- Environmental Management
- Mitigation
- Outreach
- Planning
- Project Management
- Regulatory

### Corporate Partner Contacts

CONTACT 1	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	CONTACT 2	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Name		Name	
Suffix (ex. P.E. CFM)		Suffix (ex. P.E. CFM)	
Title		Title	
Home Address		Home Address	
City / State / Zip		City / State / Zip	
Primary Address?	<input type="checkbox"/> OFFICE <input type="checkbox"/> HOME	Primary Address?	<input type="checkbox"/> OFFICE <input type="checkbox"/> HOME
Office Phone		Office Phone	
Home Phone		Home Phone	
Mobile Phone		Mobile Phone	
Primary Email		Primary Email	
Email 2		Email 2	

### Select Options (dues apply to the calendar year)

**NOTE: Only [ASFP Individual Membership](#) qualifies for CFM discounts – All Staff gets Webinar discounts – 2 Contacts get Conference Discounts**

- Corporate Partner 11–100 employees (2 contacts)..... \$400
- HARD COPY NEWSLETTER (Add per Contact) ..... \$40

Amount Due: \_\_\_\_\_

### Method of Payment

- Check Enclosed -- # \_\_\_\_\_ (Payable to ASFP)
- Purchase Order Enclosed -- # \_\_\_\_\_
- Credit Card..... Name on Card: \_\_\_\_\_ Credit Card # \_\_\_\_\_  
Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_
- Please send invoice

Return completed form and payment to:  
ASFP Membership, 575 D'Onofrio Drive, Ste. 200, Madison, WI 53719 | [memberhelp@floods.org](mailto:memberhelp@floods.org) | FAX: 608-828-6319