



# Association of State Floodplain Managers

8301 Excelsior Dr., Madison, WI 53717 | 608-828-3000 | [www.floods.org](http://www.floods.org) | [memberhelp@floods.org](mailto:memberhelp@floods.org)

## SMALL CORPORATE PARTNER APPLICATION (1-10 Employees) - 2024

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

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

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

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

### Primary Discipline (select one):

- |  |   |
|--|---|
| <input type="checkbox"/> Administrative/Management | <input type="checkbox"/> Outreach           |
| <input type="checkbox"/> Emergency Management      | <input type="checkbox"/> Planning           |
| <input type="checkbox"/> Engineering               | <input type="checkbox"/> Project Management |
| <input type="checkbox"/> Environmental Management  | <input type="checkbox"/> Regulatory         |
| <input type="checkbox"/> Mitigation                |   |

### Corporate Partner Contact

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

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

**NOTE: Only ASFP Individual Membership qualifies for CFM Exam and renewal discounts –**

**All Staff get Webinar discounts – any 1 Contact gets Conference Discounts**

☐ Corporate Partner 1-10 employees (1 contact) .....\$200

### Method of Payment – Payment is non-refundable

☐ Check Enclosed -- # \_\_\_\_\_ (Payable to ASFP) ☐ Purchase Order Enclosed -- # \_\_\_\_\_

☐ Credit Card – Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Credit Card \_\_\_\_\_ Security Code \_\_\_\_\_

☐ Please email Invoice (payment due) ☐ Please email Receipt (payment made) to: \_\_\_\_\_

Return completed form and payment to:

ASFP Membership, 8301 Excelsior Dr., Madison, WI 53717 | [memberhelp@floods.org](mailto:memberhelp@floods.org) | FAX: 608-828-6319