

Please return your completed application by email, mail or fax to IACA Member Services at:
P. O. Box 821, Colleyville, TX 76034 USA fax +1 972 692 8186, email iaca@shaw.ca



International Association of Currency Affairs

www.currencyaffairs.org

Membership Application Form

Membership Structure and Annual Fees: *Please check the appropriate box*

	Individual Membership	Silver Membership	Gold Membership	Platinum Membership
Financial Institution		- 3 delegates \$1,500 <input type="checkbox"/>	- 5 delegates \$2,500 <input type="checkbox"/>	- 10 delegates \$3,500 <input type="checkbox"/>
Supplier Institution		- 6 delegates \$3,500 <input type="checkbox"/>	- 10 delegates \$4,500 <input type="checkbox"/>	- 15 delegates \$6,000 <input type="checkbox"/>
Individual	\$550 <input type="checkbox"/>			

Membership Categories:

Financial Institution: Issuing Authority, Central Bank, Security Authorities, non-Competitive State Banknote Printers, and Commercial Banks.

Supplier Institution: Currency Producers (including competitive State Banknote Printers, and Private Printers), Volume Currency Handlers (typically non-governmental, including cash transportation and processing), Interested 3rd parties where appropriate.

Individual: A person who qualifies for membership, but is not a 'named delegate' of a Member institution.

Member Information

Company Name: _____

Primary Contact Name: _____ Position/Title: _____

Street Address: _____

City: _____ State/Province: _____

Country: _____ Zip/Postal Code: _____

Telephone: _____ Fax: _____

Email: _____

Date: ____/____/____
(DD/MM/YYYY)

Payment Methods: All fees to IACA are payable in US\$ dollars without deduction of any bank charges, either by bank wire transfer, by bank check or by credit card. To assist in payment tracking, please indicate which payment method you will use:

- Please make check payable to **IACA** and mail to: IACA, P. O. Box 821, Colleyville, TX 76034 USA.
- To pay by bank wire transfer: Please check here and we will email our bank routing and account information to you. Your email address: _____
- To pay with credit card: Please check here and we will send email instructions for processing a credit card payment (via PayPal). Your email address: _____

IACA membership is subject to approval by Board of Directors.

IACA +1 778 998 5723, fax +1 972 692 8186, email iaca@shaw.ca

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