



Enrollment Form

Providing
Inter-Industry
Leadership for the
Advancement of
Electronic Payment
Systems and
Commerce

Join EFT industry leaders and receive the many benefits and services of membership in the Electronic Funds Transfer Association.

Please print or type:

NAME _____

TITLE _____

COMPANY _____

STREET _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

Membership Level:

- Sustaining Company Membership (includes seat on EFTA Board of Directors)
\$20,000** for over 250 employees
- Sustaining Company Membership (includes seat on EFTA Board of Directors)
\$10,000** for under 250 employees
- Associate Individual Membership (includes membership in one council)
\$5,000
- Government — \$1,250

Please indicate your choice of Council(s):

- Electronic Benefits Transfer (contact us for more information)
- eFinancial Enablers
- Legislative and Regulatory

Please select your payment preferences and mail or fax this completed enrollment form to us:

- Check (make payable to EFTA)
- Please bill me (PO#): _____
- Please charge my: Visa MasterCard American Express Discover

CARDHOLDER'S NAME _____

CREDIT CARD NUMBER, EXP DATE: _____

CARDHOLDER'S SIGNATURE (REQUIRED): _____

Payment of membership dues is deductible for most members of a trade association under Section 162 of the Internal Revenue code as an ordinary and necessary business expense. EFTA estimates that 10% of your dues are not deductible as a business expense because of EFTA's lobbying activities on behalf of its members.