

Middle Market Investment Banking Association (MMIBA®)

MEMBERSHIP APPLICATION



Please complete the information below (Print or Type): Your name and address exactly as you wish it to appear in MMIBA's Credentialed Member Directory on its website at www.mmiba.com and on your Membership Certificate. (As a benefit to MMIBA membership, you will receive complimentary membership in the National Association of Certified Valuators and Analysts (NACVA) and be listed in NACVA's online Directory at www.nacva.com.) To better serve you, we request a curriculum vitae and a business photo (head shot) be submitted along with your application.

MEMBER INFORMATION:

Name: _____ Designations currently held: _____
Name of Firm, Organization, or Agency: _____
Address: (include Mail Stop if applicable) _____
City: _____ State: _____ ZIP: _____
Tel: _____ Fax: _____
E-mail: _____ Position in Firm: (or Official title) _____
Areas of Expertise: _____

SHIPPING ADDRESS: (If different from address above)

Name of Firm, Organization, or Agency: _____
Address: (include Mail Stop if applicable) _____
City: _____ State: _____ ZIP: _____

HOME ADDRESS: (Note: This address will not appear in any MMIBA publication. It will be used by MMIBA if you change your place of employment and we are unable to obtain a forwarding address and phone number.)

Address: _____
City: _____ State: _____ ZIP: _____
Tel: _____ Fax: _____

PROFESSIONAL CONDUCT:

1. Have you ever been convicted of any felony or any crime carrying a punishment (whether served or not) of more than one year in prison?
 Yes No If Yes, please explain: _____
2. Have you been convicted of a misdemeanor involving moral turpitude (lying, cheating, stealing, or other dishonest conduct) or any substantially equivalent crime in any court of law? Yes No If Yes, please explain: _____
3. Have you had any professional license, professional certification, or professional membership revoked, refused, or suspended (other than for non-payment of dues)? Yes No If Yes, please explain: _____

I am a: Practitioner pursuing the CMAP®

If applying for Professional or Associate Membership, you do not need to respond to the above question.

CHECK THE APPLICABLE OPTION: (Payable by Check or Credit Card)

- Practitioner Annual Membership Dues: \$485* Associate Annual Membership Dues: \$125*
 Professional Annual Membership Dues: \$215* Student Annual Membership Dues: \$125*
 Academician Annual Membership Dues: \$215* * Annual dues are subject to change

PAYMENT METHOD:

Check #: _____ Charge to My: AMEX VISA MasterCard Discover Diners Club
Credit Card Number: _____ Expiration Date: _____
Credit Card Billing Address: (check if same as stated above) _____
Signature of Applicant[†]: _____ Date: _____

[†] Your signature will authorize NACVA/MMIBA to confirm the above information via e-mail and/or fax, if necessary and authorize NACVA/MMIBA to use either medium for future communication. NACVA/MMIBA will not disclose or share this information with third parties to secure confidentiality. Applicant agrees to abide by the rules governing this Association and its members and agrees to hold NACVA/MMIBA harmless from any claims arising from or related to membership in NACVA.

RETURN APPLICATION & APPLICABLE DUES TO:

MMIBA—Middle Market Investment Banking Association • www.mmiba.com
c/o 1111 Brickyard Road • Suite 200 • Salt Lake City • Utah • 84106-5401
Tel: (801) 486-0600 • Fax: (801) 486-7500 • Internet: www.nacva.com