



New Member Application / Change of Information Form

This Information Is A/An: New Submission Update

Organization: _____ # of Full Time Employee's (FTE): _____
Main Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____ Fax: _____
E-Mail: _____ Web-Site: _____

1. Check one that applies:

- Government/State Healthcare Higher Ed Library K-12
 Religious/Charitable Public Sector Financial Other: _____

2. What is your primary reason(s) for participating in the MiCTA programs?

3. How did you hear about MiCTA?

4. Are you a Non-Profit?: 501c3 501c6 or Other***: _____

Primary Contact: _____ E-Mail: _____
Title: _____ Department: _____
Phone Number: _____ Fax: _____
Address: _____
(Same as Main)
City: _____ State: _____ Zip: _____

Billing/Invoice
Contact: _____ E-Mail: _____
Title: _____ Department: _____
Phone Number: _____ Fax: _____
Address: _____
(Same as Main)
City: _____ State: _____ Zip: _____

Organization: _____

Other Contact: _____ E-Mail: _____

Title: _____ Department: _____

Phone Number: _____ Fax: _____

Address: _____

(Same as Main)

City: _____ State: _____ Zip: _____

Other Contact: _____ E-Mail: _____

Title: _____ Department: _____

Phone Number: _____ Fax: _____

Address: _____

(Same as Main)

City: _____ State: _____ Zip: _____

Mail application with payment to:

**MiCTA
4352 Bay Road # 207
Saginaw, MI 48603**

Annual membership fee non-refundable

Credit Card, Check or Money Orders Accepted

Annual Membership Fee

- \$100 - Under 300 FTE's*
- \$200 - Over 300 FTE's*
- \$400 - ISD, RESD, ESA, ESD**

*FTE's – Full Time Employee's
(2 Part Time Employees = 1 Full Time Employee)

**Membership will cover all K-12 Schools in your District.
***Non-Profit Group Purchasing Organizations (GPOs) may not qualify for membership

You can also fill out an online application and pay online at www.mictatech.org - by clicking the "Join Now"

Type of Card: _____

Card #: _____ - _____ - _____ - _____

CVV: _____ Expiration Date: ____ / ____

Name on the Card: _____

Signature: _____

Phone #: _____

Email Receipt to: _____ @ _____