



FINANCIAL SERVICE CENTERS OF AMERICA, INC.  
A NATIONAL TRADE ASSOCIATION

## 2015 PRIMARY MEMBERSHIP APPLICATION

### COMPANY INFORMATION

Company Name \_\_\_\_\_

Contact Person/Title \_\_\_\_\_

Company Website Address \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address\* \_\_\_\_\_

Landline Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**\*Note: It is important to provide an email address as a substantial amount of information is sent to members via email.**

FiSCA By-Laws - May 1999 - Membership Article III Section A3:

Each member shall pay annual dues based upon the number of locations owned and operated by the member.

I hereby certify to FiSCA, ownership of [       ] locations.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

**2015 ANNUAL DUES (\$330.00 per location owned by the applicant)    Number of Outlets: [       ] X \$330.00 =**

**If paying by check, please return this form with payment to:**

FiSCA, 1020 19th Street, N.W., 7<sup>th</sup> Flr., Washington, DC 20036

Attn: LeeAnn Thompsom

Phone (202) 719-2388    Fax (202)419-1843    Email [lthompson@fisca.org](mailto:lthompson@fisca.org)

**If paying by credit card:**

[       ] Visa    [       ] MasterCard    [       ] Discover    [       ] American Express

Credit Card # \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Security Code \_\_\_\_\_

Expiration Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Amount \_\_\_\_\_

Billing Address \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

***Refund Policy: Subject to approval of an application for membership, FiSCA membership dues are non-refundable.***

**PLEASE NOTE:** Based on a review of FiSCA's 2013 expenses, approximately 28% of your annual dues is attributable to lobbying and political expenditures and, pursuant to the Internal Revenue Code, is non-deductible as a business expense for Federal Income Tax purposes. We suggest you contact your personal tax advisor for further clarification

**ADDITIONAL CONTACT INFORMATION**

In order for FiSCA to serve you best, please be sure to provide us with the contact information for any additional staff who would also benefit from receiving FiSCA's e-*Currents*, daily news clips and notices. Email to [lthompson@fisca.org](mailto:lthompson@fisca.org).

Name \_\_\_\_\_

Title \_\_\_\_\_

Street Address (if different from yours) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Landline Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Please check here if they would like to be added to our mobile text alert list

Name \_\_\_\_\_

Title \_\_\_\_\_

Street Address (if different from yours) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Landline Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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Landline Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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