

Membership Application



The International Association of Speakers Bureaus (IASB) is a United States 501(c)6 tax-exempt, non-profit trade association.

MEMBERSHIP QUALIFICATIONS

Any company or individual (entity) whose primary business is booking, representing and/or managing speakers or presenters. The entity must have annual revenue that is a minimum of 51% from the afore referenced activities *or if entity is a division of another company, the division must produce a minimum annually of \$1,000,000 (USD or equivalent) from the afore referenced activities.*

MEMBER DUES & FEES

All amounts are in US Dollars. Fees and Dues are non-refundable and non-transferrable.

- Processing Fee \$200 USD
Due and payable at application. Former Members that are reinstating and retaining their Original Join Date have this fee waived.
- Annual Dues..... \$600 USD
Due and payable at acceptance.
Auto-payment Plans are available.

****Retention of Original Join Date:** Please check the box located in the upper right hand corner of the form and you will receive an invoice for your past dues.

PROCESS & TIMELINE

Complete applications are reviewed by the Membership Committee. Applicants that receive a preliminary approval by the committee are then submitted to the full membership for comment. This process can take up to 60 days in total.

Tax ID: 36-4493025 :: Dues are not tax deductible as US charitable contributions, please consult a tax advisor. 0% of dues are used for lobbying expenses.

INTERNATIONAL ASSOCIATION OF SPEAKERS BUREAUS

4015 S. McClintock Drive, Suite 110
Tempe, AZ 85282 USA
+1 (480) 839-1423 :: www.iasbweb.org

Type: New Application Reinstatement (Retain Original Join Date Yes**)

CONTACT INFORMATION

The following information is included in Member Directories (print and online).

Member Name*:

If above is a division - parent company: _____

If above is a DBA - registered name: _____

City: _____ State/Province: _____ Country: _____

Phone: _____ Website: _____

The following information is also included in the publicly-accessible Directory located online.

You may Opt-Out of the Public Directory by checking this box .

Mailing Address*: _____

City: _____ State/Province: _____ Postal Code: _____

Main Email: _____

The following information is not included in Member Directories but is accessible to IASB Volunteers and Staff as appropriate.

Primary Contact: Person that will represent entity in official membership business - they will be the only recipient of official member notices and will have the ability to update the entity's record in the online directory.

Name: _____ Title: _____

Email: _____ Phone: _____

Ownership:

Name(s) of Owners of above Entity: _____ Not Applicable

Were any of the individuals listed above previously involved with a current or former member?

No Yes - please send an email with the member name and approximate dates to info@iasbweb.org.

MEMBER PROFILE

Please complete the following:

- Business Model: Non-exclusive Bureau Exclusive Agency Speaker Management
 Hybrid Other (please describe): _____
- Number of Employees: _____
- If the entity represents speakers *through an exclusive relationship or management agreement*, please indicate the average number of speakers represented on an annual basis: _____
- If the entity works with clients outside of the country indicated above, please indicate the additional countries: _____

DOCUMENTATION

Please attach copies of the following and submit along with this form to info@iasbweb.org.

- Proof of Existence (i.e. copy of incorporation papers, business license or state/government issued identification card). If a division or DBA, please provide related documents showing relationship.
- Payment Authorization Form (located on Page 2)
- Signed Membership Affidavit (located on Page 3).
- References from 3 Speakers the entity has worked with in the last year.
- References from 3 Clients (Buyers or Bureaus) the entity has worked with in the last year.



Payment Authorization

Member Name _____

MEMBER DUES & FEES

- Processing Fee\$200 US Funds
Due and payable at application. Non-refundable or transferrable. Former Members that are reinstating and retaining their Original Join Date have this fee waived
- Annual Dues.....\$600 US Funds
Due and payable at acceptance/approval. Non-refundable or transferrable.

DUES PAYMENT PLANS (CHECK A BOX BELOW)

For convenience, IASB offers a variety of payment plans for the Dues once the application is approved. Please select a plan below for the dues:

- Pay in Full:** \$600 Upon Acceptance.
The card provided below will be charged \$600 or if paying by check, IASB will invoice for the amount due - payment must be received prior to membership activation.
- Auto-pay* Quarterly Plan:** \$150 Upon Acceptance.
The card provided will be charged \$150 every 3 months and the membership will auto-renew on the 1st of the month following the anniversary date.
- Auto-pay* Annual Plan:** \$600 Upon Acceptance.
The card provided will be charged \$600 for the first year's dues; thereafter the membership will auto auto-renew on the 1st of the month following the anniversary date. Members selecting this option will be eligible upon Renewal for the Paying Early Discount as indicated on the Dues Renewal Notice.

Note: Reinstating Members - if you checked the box on Page 1 indicating you wish to retain your original join date, your past dues will be calculated and you will be invoiced for the total amount owed - you do not need to check one of the above boxes unless you would like to choose one of the Auto-Pay plans for the following year's dues.

*Auto-pay Plans require a Credit Card with an expiry date that is at least one year away. Auto-pay Plans may be cancelled by notifying IASB at least 30 days prior to the anniversary date - payment of any outstanding balance must be made at that time.

METHOD OF PAYMENT (CHECK A BOX BELOW)

- Paying by Check:** Mail check to the address in the shaded box below. Processing of the application will begin upon receipt of the check. Make check payable to IASB for \$200 (US funds only). The person listed below will be invoiced for the dues upon approval of the application.
- Paying by Credit Card:** IASB accepts American Express, MasterCard and Visa. Please complete the section below and send with completed application. A receipt for the charge will be mailed to the person indicated below.

PAYMENT CONTACT PERSON

Name: _____ Phone: _____ Email: _____

CREDIT CARD PAYMENT

Signature: _____
By signing above, I certify I am an authorized user of the credit card listed to the right and have read and agree to the terms and conditions. I understand the processing fee and dues are non-refundable and nontransferable. I authorize IASB to charge amount indicated below.

- Application/Processing Fee (\$200)
- Dues for Payment Plan I have selected above.

Name on Card: _____

Billing Address: _____

City: _____ **State:** _____ **Zip:** _____

Number: _____

CWV: (Amex 4-digits; Visa/MC 3 digits) _____ **Expiry:** _____ / _____

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IASB USE ONLY: M#: _____
S#: _____
D#: _____
Autopay Plan: Annual Quarterly

Tax ID: 36-4493025 :: Dues are not tax deductible as US charitable contributions, please consult a tax advisor. 0% of dues are used for lobbying expenses.

Member Name _____

QUALIFICATIONS FOR MEMBERSHIP

Membership is open to a company or individual whose primary business is booking, representing and/or managing speakers or presenters. The entity must have annual revenue that is a minimum of 51% from the afore referenced activities *or if entity is a division of another company, the division must produce a minimum annually of \$1,000,000 (USD or equivalent) from the afore referenced activities.*

If any of the qualifications for membership are not met, or have been misrepresented, the entity's membership to IASB may be suspended or revoked. Applying member agrees to provide verification of these qualifications upon request by IASB Staff, the Membership Committee or Board of Governors.

STANDARDS FOR PROFESSIONAL CONDUCT Revised 1/1/2013

Article 1. The IASB member shall comply with the terms of all contracts.

Article 2. The IASB member shall accurately, truthfully, and appropriately represent its relationships with speakers, speakers bureaus, and others and shall not use names of people or entities in a way that might mislead or be misleading.

Article 3. The IASB member shall communicate effectively and truthfully with customers, speakers, and other speakers bureaus.

Article 4. The IASB member shall act with diligence in a professional, competent, and timely manner.

Article 5. The IASB member shall comply with all international, federal, state, and any other applicable laws and regulations.

Explanation: The maintenance of the marketplace's confidence and the professionalism, honesty, ability and integrity of the lecture bureau industry is primary to the success of the International Association of Speakers Bureaus (IASB). IASB and its members have adopted these Standards of Professional Conduct ("Standards") that each member subscribes to as a condition of membership. Violations of these Standards shall be determined in accordance to the Bylaws, policies, and procedures of the International Association of Speakers Bureaus, including the IASB Standards and Disciplinary Procedures. Any such disciplinary action shall be final and binding upon the IASB member or members and without recourse to the Association, its Officers, members, or staff. This recognized, the Board and members of the IASB will from time to time reconsider and revise the Standards and the processes around it. Changes will be made in accordance with the processes and procedures set out by the By-laws of the association.

ACKNOWLEDGEMENT & SIGNATURE

The information and answers contained on the accompanying Membership Application are correct to the best of my knowledge and belief. On behalf of my entity I agree that this application will be the basis for and part of the membership that may be issued, and that my entity shall hold IASB, and its officers, directors, employees, agents, and each of them, harmless and indemnify and release IASB, its Officers, Directors, employees, agents and others acting on behalf of IASB from any and all liability arising out of the acceptance or rejection of this application and the suspension or termination of membership for any reason.

By signing below, I acknowledge that I am an authorized representative of the entity listed above (Member Name) and I pledge my commitment and my entity's commitment to the association's purposes, goals, rules, regulations and Standards of Professional Conduct and submit that we meet the qualifications for membership, have read the Standards, agree to abide by the Standards and are not knowingly in current violation of the Standards. I understand that my entity's membership is not in effect until this application is accepted by IASB and payment of the dues has been processed. I give permission for IASB to communicate with me, the individual listed as the Primary Contact and the Payment Contact regarding this application and our membership once approved.

Signature _____ Date _____

Printed Name _____ Phone _____

Please complete and sign this affidavit and send along with your completed membership application and payment to IASB.
If you have questions or need assistance, please contact the IASB office at (480) 839-1423.