

SUBMIT APPLICATION TO: membership@pimw.org

Please complete Printing Industry Midwest's (PIM) entire membership application and email completed form to membership@pimw.org.

FIND YOUR DUES PAYMENT:

PIM dues are based annual sales. Mark the line that fits your organization. You can make monthly or annual payments.

ANNUAL SALES		DUES	DUES
FROM	TO	ANNUAL	MONTHLY
0	750,000	\$750	\$62.50
750,000	3,000,000	\$1,740	\$145.00
3,000,000	10,000,000	\$3,750	\$312.50
10,000,000	20,000,000	\$5,760	\$480.00
20,000,000	50,000,000	\$8,730	\$727.50
50,000,000+		\$10,770	\$897.50

SERVICES YOU PROVIDE:

Please mark all that apply to your organization.

CREATION	MANAGEMENT	OUTPUT	OUTPUT	DISTRIBUTION	MARKETING
<input type="checkbox"/> Branding/identity	<input type="checkbox"/> Channel management	<input type="checkbox"/> Bindery	<input type="checkbox"/> Offset print	<input type="checkbox"/> Email	<input type="checkbox"/> Analytics
<input type="checkbox"/> Content Design	<input type="checkbox"/> Content management	<input type="checkbox"/> Catalogs/publications	<input type="checkbox"/> Packaging conversion	<input type="checkbox"/> eMobile	<input type="checkbox"/> Consumer research
<input type="checkbox"/> Cross media strategy	<input type="checkbox"/> Inventory management	<input type="checkbox"/> Digital print	<input type="checkbox"/> Promotional print	<input type="checkbox"/> Fulfillment	<input type="checkbox"/> Data analytics
<input type="checkbox"/> Email design	<input type="checkbox"/> Prepress	<input type="checkbox"/> Direct Mail	<input type="checkbox"/> Prototypes	<input type="checkbox"/> Mailing	<input type="checkbox"/> Data management
<input type="checkbox"/> SMS creation	<input type="checkbox"/> Variable data	<input type="checkbox"/> eBooks/ ePublications	<input type="checkbox"/> Quick print	<input type="checkbox"/> Online ordering	<input type="checkbox"/> Marketing activation
<input type="checkbox"/> Video production	<input type="checkbox"/> Web to print	<input type="checkbox"/> Finishing	<input type="checkbox"/> Security print	<input type="checkbox"/> Postal optimization	<input type="checkbox"/> Marketing integration
<input type="checkbox"/> Website design	<input type="checkbox"/> Workflow management	<input type="checkbox"/> Foil & effects	<input type="checkbox"/> Wide format print	<input type="checkbox"/> Warehousing	<input type="checkbox"/> Marketing services
		<input type="checkbox"/> Forms			<input type="checkbox"/> SEO
		<input type="checkbox"/> Letterpress			<input type="checkbox"/> Social Media

COMPANY INFO:

Company Name: _____

Number of Employees: _____ Main Phone: _____

Company Website: _____

Company Address: _____

City: _____ State: _____ Zip: _____

LIST 3 REASON WHY YOU JOINED PIM:

1. _____

2. _____

3. _____

HOW DID YOU HEAR ABOUT PIM?

Search Engines Event or Webinar Word of Mouth

Social Media (LinkedIn Facebook Twitter) Other

PAYMENT OPTIONS:

Name: _____ Email: _____

Billing Address: _____

Payment Preference:

Check is enclosed Send an invoice Charge card

If you chose "Charge Card," please complete the following:

Card Type: Visa Master Card American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Continue this application on page 2 >>>

MAIN CONTACT INFO:

The main contact is the person who will receive all Printing Industry Midwest's (PIM) emails, updates, news, resources and services. This person is responsible for passing along and sharing PIM's resources with the rest of your organization. Sometimes PIM will only reach out or share news with just this person.

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

ADDITIONAL CONTACT INFO:

If you have additional contacts you want to PIM to connect with, please list them below. It is helpful to have multiple contacts in case someone leaves or is busy. We strongly suggest to list one person from each department. You can list more at a later date, PIM will ask you during the onboarding process.

PRESIDENT / CEO / OWNER:

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

ENVIRONMENTAL HEALTH & SAFETY / PRODUCTION:

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

HUMAN RESOURCES:

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

MARKETING / SALES:

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

AGREEMENT TO JOIN:

We understand our organization membership will be automatically renewed unless terminated in writing by either party.

PRINTED NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____