

APPLICATION FOR MEMBERSHIP



Please return completed application to the IAA via Email: join@investmentadviser.org or
Mail: IAA at: 818 Connecticut Ave, NW, Suite 600, Washington DC 20006. Payment may be submitted with application, but it is not a requirement for submission. Your firm will be invoiced after receipt of application.
Membership does not and may not be used to imply IAA endorsement of any firm, products, services, or personnel.

Firm Contact Information - PLEASE PRINT OR TYPE ALL RESPONSES

Firm Name	Acronym	
Mailing Address	Suite/Floor Number	City, State & Zip Code
Telephone Number	Website	

Firm Information

1. Please provide your firms CRD number: _____
2. How many years has your firm been in business as an investment adviser? _____
3. Your firm's regulatory assets under management as reported on the most recent Form ADV: _____
4. Is your firm currently registered as an investment adviser with the Securities and Exchange Commission (SEC)? Yes No
5. How did you discover the IAA? _____
6. Please indicate the name of any individual or firm that referred you to the IAA: _____
7. Indicate your firm's areas of interest (check all that apply): Advocacy Efforts Educational Programs Compliance Resources
 Legal Team Access Newsletter and Publications Certification Programs Networking Opportunities Other: _____

Firm Staff Information (Email addresses serve as the username for IAA online access.)

"Primary Contact" to the IAA for official matters and notices

Mr. Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
				<input type="checkbox"/> Go Paperless?
Title/Position	Email Address		Receive IAA communications only by email when possible	
Telephone Number	Fax Number	Address (if different from firm mailing address)		

"Secondary Contact" to the IAA for official matters and notices

Mr. Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
				<input type="checkbox"/> Go Paperless?
Title/Position	Email Address		Receive IAA communications only by email when possible	
Telephone Number	Fax Number	Address (if different from firm mailing address)		

"Primary Compliance" contact to the IAA for compliance matters (same person as primary or secondary contact)

Mr. Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
				<input type="checkbox"/> Go Paperless?
Title/Position	Email Address		Receive IAA communications only by email when possible	
Telephone Number	Fax Number	Address (if different from firm mailing address)		

"Billing Contact" for membership dues invoices (same person as primary or secondary contact)

Mr. Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
				<input type="checkbox"/> Go Paperless?
Title/Position	Email Address		Receive IAA communications only by email when possible	
Telephone Number	Fax Number	Address (if different from firm mailing address)		

“Public Contact” for public listing of IAA member firms (same person as primary or secondary contact)

Mr. Ms.

First Name	Middle Name	Last Name	Suffix & Designation(s)	Preferred Name
				<input type="checkbox"/> Go Paperless?
Title/Position		Email Address	Receive IAA communications only by email when possible	

Telephone Number Fax Number Address (if different from firm mailing address)

Additional firm staff to receive member benefits

Mr. Ms.

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				<input type="checkbox"/> Go Paperless?
Title/Position		Email Address	Receive IAA communications only by email when possible	

Telephone Number Fax Number Address (if different from firm mailing address)

Additional firm staff to receive member benefits

Mr. Ms.

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Title/Position		Email Address	Receive IAA communications only by email when possible	

Telephone Number Fax Number Address (if different from firm mailing address)

Your firm's IAA membership will allow an unlimited number of its employees to receive IAA member benefits.

Please attach additional pages to add more firm staff. Thank you!