

APPLICATION FOR MEMBERSHIP

Please return completed application to the IAA **via email:** join@investmentadviser.org
or mail to: 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.

1 Firm Contact Information — PLEASE PRINT OR TYPE ALL RESPONSES

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

2 Firm Information (These questions determine your membership type.)

How many employees do you have? _____ Are you a fiduciary adviser? YES NO

If YES, what are your firm’s regulatory assets under management? _____

If NO, what service(s) do you provide to investment advisers? _____

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

• **Primary Contact to the IAA for official matters and notices**

Prefix	First Name	Middle Name	Last Name	Suffix & Designation(s)
	Preferred Name	Title/Position	Email Address	
Telephone Number	Work Address (if different from firm mailing address)			

• **Billing Contact**

Prefix	First Name	Middle Name	Last Name	Suffix & Designation(s)
	Preferred Name	Title/Position	Email Address	
Telephone Number	Work Address (if different from firm mailing address)			



*Your firm’s IAA membership allows an unlimited number of employees to receive IAA benefits.
 IAA will reach out to you for more information. Thank you!*