



# 2018 VICA Membership Form

## Company Information

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Web Address: \_\_\_\_\_

Number of Employees: in L.A. County \_\_\_\_\_ Year founded: \_\_\_\_\_ Referred to VICA \_\_\_\_\_

Please provide a brief description (25 words or less) of your company:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Primary Contact

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

## Additional Contact(s)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

*Please provide the names and contact information for any additional contacts on a separate sheet or via email.*

## Payment Method (if check not attached)

Total Amount: \_\_\_\_\_ (Silver level or higher - payment plan options available if needed)

VISA/MasterCard/American Express/Discover #: \_\_\_\_\_ Sec # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Zip: \_\_\_\_\_ Card Holder Signature: \_\_\_\_\_

Federal Tax ID # 23-7182039 – 501(c)(4) – Talk to your tax advisor about deducting your Valley Industry and Commerce Association investment as a business expense. VICA estimates that for 2018, \$125.00 of its membership fee goes towards VICA's lobbying efforts (50% local, 40% state, 10% federal) and therefore membership dues may not be tax deductible.

## For VICA Use Only

Date received: \_\_\_\_\_ Processed: \_\_\_\_\_ Facebook/Logo: \_\_\_\_\_ New Packet: \_\_\_\_\_