



**Coalition for Employment
Through Exports, Inc.**

CEE MEMBERSHIP APPLICATION

THANK YOU FOR YOUR MEMBERSHIP. PLEASE PROVIDE THE FOLLOWING INFORMATION.

POINT OF CONTACT

ORGANIZATION NAME

BUSINESS MAILING ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

FAX

E-MAIL

WEBSITE

CHOOSE YOUR YEARLY CEE MEMBERSHIP RATE

- Small Business Membership @\$5,000 _____
 - Full Membership @\$14,000 _____
 - Board Membership @\$20,000 _____
- Total CEE Membership** \$ _____

PAYMENT INFORMATION

- Check or purchase order payable to Coalition for Employment through Exports, Inc.

PURCHASE ORDER NUMBER

Please charge my:

- Mastercard Visa Discover American Express

CARD NUMBER

EXPIRATION DATE

NAME ON CARD

SIGNATURE

COMPLETED MEMBERSHIP APPLICATION

1. Print your completed application, enclose your check, and mail to CEE at the address listed below.
2. Complete and submit your application electronically using the 'Submit Form' link below.

Coalition for Employment Through Exports, Inc.
1625 K Street, NW Suite 200
Washington, DC 20006

T 202.296.6107 F 202.296.9709
www.usaexport.org