



## MEMBERSHIP APPLICATION

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

Name of Representative: \_\_\_\_\_

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

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Number of Indiana Locations: \_\_\_\_\_

Approximate No. of Indiana employees: \_\_\_\_\_

Contributions to the non-profit Indiana Fiscal Policy Institute [IRC Sec. 501(c)(3)]  
are deductible as provided by Federal and State Tax Law.

**Please mail or fax this application to:**

**Indiana Fiscal Policy Institute  
PO Box 441165  
Indianapolis, IN 46244  
Phone: 317-684-5485 Fax: 317-223-0485**