

**AAEM ANNUAL MEMBERSHIP DUES
CORPORATE**

Date: _____

For: Membership Year 2017

(January 1 – December 31, 2017)

Company: _____

Mailing Address: _____

Telephone Number: _____ **Fax:** _____

Name: _____ **Position:** _____

Email: _____ > 300 employees or <300 employees

Name: _____ **Position:** _____

Email: _____ > 300 employees or <300 employees

Name: _____ **Position:** _____

Email: _____ > 300 employees or <300 employees

Name: _____ **Position:** _____

Email: _____ > 300 employees or <300 employees

Name: _____ **Position:** _____

Email: _____ > 300 employees or <300 employees

Total Amount Enclosed: \$ _____

\$50 per Company Rep for companies with less than 300 employees

\$100 per Company Rep for companies with more than 300 employees

Please make check payable to:

**AAEM
P.O. Box 5040
Montgomery, AL 36103**