

# Associate Membership Application

Company Name

Primary Contact

Title

Mailing Address

City/State/Zip

Phone

Fax

E-mail

Homepage Address:

http://www.\_\_\_\_\_

May we link to your site?  Yes  No

Company Description

**I am applying, on behalf of the company (or Division) listed above, to become an EEI Associate Member.** (Please complete the following four items.)

1) The company's (or Division's) annual revenues are (check one):

Annual Associate Dues

- Less than \$50 million      \$4,000  
 More than \$50 million      \$6,000

2)  I have attached information that will establish the organization's revenue category (annual report, income statement, letter, or other supporting data).

3)  I understand that in order to be eligible to participate as an EEI Associate, my company cannot be engaged in the generation, transmission, distribution, sale, or brokerage of electricity.

4)  Payment is enclosed.     Payment will follow.     Please invoice me.

Signature

Date

**Return to:** Brian Farrell, Director of Associate Services • Edison Electric Institute  
701 Pennsylvania Avenue, NW • Washington, DC 20004-2696  
Tel: (202) 508-5649 • Fax: (202) 508-5360 • bfarrell@eei.org