

NEW MEMBER APPLICATION

Membership Categories

Stadium Manager

Any person actively engaged in the management or administration of a stadium or a related facility.

Dues: \$200

Affiliate Member

Select groups or associations whose function or purpose is the management or promotion of sports, entertainment and recreational facilities or related concerns.

Dues: \$200

Faculty Member

One who is employed in a college or university with a full-time job description of teaching undergraduate or graduate courses, or supervising interns, in sport management, facility management, or sport administration.

Dues: \$150

Student Member

Individuals who are enrolled in a full-time curriculum of undergraduate, graduate or post-graduate studies at an accredited college or university.

Dues: \$50

Corporate Member

Persons, firms, corporations and other entities that have, as a principal function, the provision of goods or services to the stadium industry.

Dues: \$750

Corporate Sponsor

Persons, firms, corporations and other entities that have, as a principal function, the provision of goods or services to the stadium industry. Includes Annual Seminar participation. For a corporate sponsor membership application, call the SMA office at 515-282-8192.

Dues prior to June 30: \$3,000

Dues after June 30: \$3,500

Send your application to:
Stadium Managers Association
525 SW 5th Street, Suite A
Des Moines, IA 50309-4501
Fax to: (515) 282-9117
Phone: (515) 282-8192

Membership Details

No person or entity shall be admitted to membership until the SMA Board of Directors has approved their membership application and their membership dues have been paid in full. New members may join the Association at any time during the calendar year by paying the full amount of dues applicable for their class of membership. Dues for all membership classes, except honorary, are payable annually. SMA operates on a fiscal year (July-June).

STADIUM
MANAGERS
ASSOCIATION



2010 - 2011 New Member Application

Name:

Position/Graduation Date:

Do you work for the?

Stadium Management Company Owner Other

Organization/Company/College or University:

Team & Stadium Affiliated With:

Address:

City/State/Zip:

Telephone:

Fax:

E-mail:

Referred by:

Membership Category:

Stadium Manager \$200 Corporate Member \$750
 Affiliate \$200 Faculty Member \$150
 Student \$50 Corporate Sponsor (*Contact SMA*)

Stadium Manager Category (if applicable):

NFL-AFC NFL-NFC MLB-AL MLB-NL
 CFL MiLB College MLS
 NASCAR Other _____

Committee preferences (check if interested):

Membership Education Scholarship

Method of Dues Payment:

Total: _____

Check made payable to SMA in U.S. funds enclosed
 VISA MC American Express Discover

Name on card:

Card Number:

Exp. Date:

Signature:

Receipt Email: (*email for the person to be sent the credit card receipt*)

Will show up as Assoc. Offices 515-282-8192 on Credit Card
Office Code: SMA Membership Dues