

2011/12 ALLIED PLUS MEMBERSHIP PROGRAM

Focus: To highlight Allied Members who use APSCU as a prime marketing outlet and to “pre-package” various marketing opportunities (advertising, exhibiting, etc.), thus providing an up-front marketing commitment creating greater visibility before our school members.

Annual Dues: \$13,500

Benefits of Membership:

	Est. Value
• Membership as an APSCU Allied Member	\$1,250 - \$3,000
• Letter (via, e-mail) to all APSCU school members announcing status as an Allied Plus member (new members only)	\$1,750
• “Free” half-page color ad space in the Annual Convention program	\$1,500
• eNewsletter co-sponsorship sent to all members	\$2,000
• “Free” half-page color ad space in the <i>Buyer’s Guide</i>	\$1,500
• “Free” 10x10 booth space at the annual convention	\$2,500
• One week early window to select booth location	<u>Priceless</u>
• Special Allied Plus logo for use on all your marketing materials.	\$1,500
• Company description on APSCU website with link from APSCU website to your company website	\$1,500
• Premium listing in <i>The Buyer’s Guide</i>	\$2,000
• Recognition at the APSCU Convention at one of the general sessions	\$1,500
• Pre-convention e-mail blast to membership highlighting your support of APSCU and encouraging delegates to visit your booth	\$1,750
• Membership mailing list at time of joining and renewal	<u>\$1,500</u>

ESTIMATED TOTAL VALUE

\$20,250 - \$22,000

Recommended Marketing Support: To better reach the APSCU market, Allied Plus members are encouraged to provide a discount on their program, product or service to APSCU members at a cost below that which a non-APSCU member could otherwise receive.

ALLIED PLUS MEMBERSHIP APPLICATION

(Membership year: July 1 – June 30)

IMPORTANT: Please complete ALL information requested below.

(Please include additional staff on a separate sheet with the same information)

Name (Dr. Mr. Mrs. Ms.)	Informal Name	Title
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Company

Address

City, State, Zip

Phone	Fax
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E-mail (required)	Website
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COMPANY DESCRIPTION:

Provide us with a short description, using **70-125** words (below or attach to this application) of your company and the products/or services for inclusion in APSCU's website and Buyer's Guide. Please also send your company logo and web address to Carolyn.Woods@apscu.org for posting on the website.

Check the appropriate box(es) to designate company's primary business (Please check no more than 8 categories)

- | | | |
|---|---|--|
| <input type="checkbox"/> Administrative Services | <input type="checkbox"/> Education Management | <input type="checkbox"/> Medical Services |
| <input type="checkbox"/> Admissions | <input type="checkbox"/> Educational Training Materials | <input type="checkbox"/> Mergers & Acquisitions |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> e-Learning / Distance Education | <input type="checkbox"/> Private Equity |
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Employment | <input type="checkbox"/> Promotion and Recognition Items |
| <input type="checkbox"/> Bookstores | <input type="checkbox"/> Financial Aid | <input type="checkbox"/> Real Estate Investment |
| <input type="checkbox"/> Campus Services | <input type="checkbox"/> Furniture | <input type="checkbox"/> Receivables Management |
| <input type="checkbox"/> Certification | <input type="checkbox"/> Information Technology Solutions | <input type="checkbox"/> Recruitment |
| <input type="checkbox"/> Certified Public Accountants | <input type="checkbox"/> Insurance | <input type="checkbox"/> Research |
| <input type="checkbox"/> Collection Services | <input type="checkbox"/> Investment Banking | <input type="checkbox"/> Retention |
| <input type="checkbox"/> Compliance & Ethics | <input type="checkbox"/> Investment Management | <input type="checkbox"/> Software |
| <input type="checkbox"/> Computer Hardware | <input type="checkbox"/> Legal Service | <input type="checkbox"/> Test/Tools/Equipment |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Library Service | <input type="checkbox"/> Training Providers |
| <input type="checkbox"/> Default Management | <input type="checkbox"/> Management Search | <input type="checkbox"/> Tuition Financing |
| <input type="checkbox"/> Development | <input type="checkbox"/> Marketing | |
| | <input type="checkbox"/> Media | |

2011/12 ALLIED PLUS PAYMENT OPTIONS FORM

Annual Dues: \$13,500

- My check is enclosed (payable to: Association of Private Sector Colleges and Universities).

Please charge my credit card:

- AMEX Visa MasterCard

Card Number _____ Exp. Date _____ CVV _____

Name on Card (please print) _____

Signature (required) _____

Print Name _____

APSCU's membership year is July 1-June 30.

Billing Address: If billing address is different from the information you completed for the main contact, please complete the following:

Contact _____

Address _____

City, State, Zip _____

Phone () _____ Fax () _____

Email _____

Mail or fax this application to:

Association of Private Sector Colleges and Universities (APSCU)

Attention: Membership Department

P.O. Box 75068 Baltimore, MD 21275-5068

Fax (866) 331-3636

**THANK YOU FOR JOINING APSCU.
Look for your welcome kit in the next few weeks.**