

Membership Application

ISA was founded in 1978 and is the only association devoted exclusively to helping executives in the training, learning and performance consulting industry grow their businesses.

- Membership in ISA is open to any organization whose business is dedicated to the transfer of learning and knowledge for work related performance
- A minimum of \$500,000 in annual revenues is required of membership applicants.
- All information on this form will be treated confidentially by ISA.
- All questions must be answered completely for this application to be accepted.
- Payment must be received with the application to activate membership.
- The application will be reviewed by ISA. If there are any questions about the information provided, you will be contacted.
- By signing the application your firm is agreeing to follow the anti-trust policy and the fundamentals of ISA.

ISA Membership Application - CHECKLIST

To expedite access to ISA membership for you and members of your company, please review this checklist to insure all necessary information requested in the membership application is completed.

If you have any questions please contact the ISA Office at 703-730-2838.

- ___ Company description of 150 words or less is attached.
- ___ "Tweet" of company description equaling 144 total characters or less is included.
- ___ Contact information for firm's designate & senior level staff members is included.
- ___ Payment for membership is provided by check or credit card.
- ___ ISA ByLaws and AntiTrust Guidelines were reviewed and will be complied with.

ISA's Value Proposition

ISA – The Association of Learning Providers

We are the only industry specific association devoted exclusively to the issues and needs of business owners in the training and performance industry. Our members bring a rich variety of perspectives, experience and expertise to the table. We share a passion for learning, for new ideas, for better solutions, and for succeeding in the business we love.

ISA Vision & Mission

ISA's vision is to serve members as an irreplaceable source of competitive advantage.

Our mission is to build, enhance and share success among members in the business of training and performance development.

ISA Imperatives

- **Build the Highest Level of Success** - Ensure ISA members stay ahead of the curve on key issues affecting business health and growth.
- **Foster Connection & Community** - Pull together to leverage ISA's source of knowledge and experience.
- **Provide Perspectives** - Reach out for diverse perspectives that shape the exploding training, learning and performance workplace.

ISA Values

ISA member companies collaborate to promote business interests and the growth of the training and performance industry.

- ISA membership requires company principals to regularly participate in the life of the Association.
- ISA believes active recruitment of people from member companies violates the good faith of the Association.
- ISA member companies respect the intellectual property rights of their customers.
- ISA member companies respect the copyrights and intellectual property of ISA member firms.
- ISA member companies serve customers with integrity and respect customer confidentiality.
- ISA member companies understand and agree to adhere to Antitrust Guidelines.

Part I - Information About Your Organization

- A.** Name of organization _____
Address _____

Phone _____ FAX _____
Website address: _____
Email: _____
- B.** Name of individual completing this application: _____
Title _____
Phone _____ FAX _____
What is your role at the firm?
____ Owner ____ Founder ____ Sr. Executive ____ Other: _____
- C.** Please list two clients who have used your program(s) or service(s):
Name _____ Name _____
Title _____ Title _____
Company _____ Company _____
Phone _____ Phone _____
We will not contact clients without contacting you first.
- D.** Date (month/year) firm was established: _____
- E.** Number of employees: _____
- F.** Annual Revenue: _____
- G.** Please attach a mission statement for your organization.

H. ISA's greatest resource is networking. By completing this section of the application ISA can help connect you with other firms that are similarly focused.

Select **the top five** subjects about which your firm primarily builds its services and/or products. Please **rank** them from 1 (highest percentage) to 5 (lowest percentage).

- | | | |
|--|---|--|
| <input type="checkbox"/> Career Development | <input type="checkbox"/> Employee Recruitment
Selection/Staffing | <input type="checkbox"/> Presentation Skills |
| <input type="checkbox"/> Executive Development | <input type="checkbox"/> Problem Solving | <input type="checkbox"/> Process Mapping |
| <input type="checkbox"/> Change Management | <input type="checkbox"/> Facilitation Skills | <input type="checkbox"/> Project Management |
| <input type="checkbox"/> Coaching | <input type="checkbox"/> Instructional Systems Design | <input type="checkbox"/> Sales Training |
| <input type="checkbox"/> Communication Skills | <input type="checkbox"/> Leadership | <input type="checkbox"/> Supervisory Training |
| <input type="checkbox"/> Computer Literacy/
Basic Computer Skills | <input type="checkbox"/> Management Skills/
Development | <input type="checkbox"/> Teams/Team Building |
| <input type="checkbox"/> Conflict Management | <input type="checkbox"/> Negotiation Skills | <input type="checkbox"/> Technical Skills Training |
| <input type="checkbox"/> Creativity | <input type="checkbox"/> New Methods/Procedures | <input type="checkbox"/> Time Management |
| <input type="checkbox"/> Customer Service/Client
Relations | <input type="checkbox"/> Organizational Change | <input type="checkbox"/> Total Quality Management |
| <input type="checkbox"/> Diversity | <input type="checkbox"/> Personal Development/Growth | <input type="checkbox"/> E-learning/Technology Platforms |

(Other)

I. ISA offers programs and services specifically for the senior level staff within an ISA firm. To insure that your staff receive appropriate announcements, please list members of your firm according to the titles below. If your firm does not have a position listed below or the title is different please indicate that on this form.

Title	Name	Phone	E-mail	Fax
CEO				
VP/Marketing				
VP/Sales				
VP/Business Development				
VP/Products & Services				
CFO				
VP/Operations				
VP/Research				
VP/Technology				
OTHER				

J. In order for ISA to comply with Federal Guidelines, by completing and signing this form you are permitting ISA to contact the firm and all individuals indicated within the firm about upcoming programs and communications via e-mail, fax and phone.

_____ Yes, I agree that ISA can communicate via e-mail, fax and phone to the firm's staff regarding ISA membership benefits and programs.

K. Describe your firm as you would to a potential client. The text you provide will be used in preparing your firm's description/entry in the membership directory. *Please limit your description to no more than 150 words.* (You may want to include industry or audience segments you focus on, as well as areas that differentiate you within the industry.)

L. Have you attached or e-mailed files of your designate's photo for the member directory?
_____ Yes _____ No

Part II - Responsibilities of ISA Member Firms

A. ISA Membership Criteria.

ISA Members:

- intend to develop and improve their businesses and are committed to growth;
- have owners/founders/CEOs (or their equivalent) who commit to active involvement in the association;
- create and distribute proprietary products and/or services as a critical strategic factor;
- have a minimum sales income level of \$500,000 in the calendar year prior to the year they apply for ISA membership;
- provide the majority of their products & services to clients external to their organizations;
- use learning/training/development technologies as a primary intervention.
- participate in ISA to learn, contribute and add value but not to actively sell to or buy from other ISA members.

Have you read the membership criteria and believe your firm meets these criteria?

Yes No I would like to discuss the criteria with someone.

Please review the ISA Bylaws at your earliest convenience. Visit www.isaconnection.org, click on Membership/Membership Application for the Bylaws or use the following link:

<http://tinyurl.com/ISA-ByLaws>

B. Anti-Trust Guidelines

Antitrust laws are intended to preserve competition by, among other things, prohibiting agreements, combinations and conspiracies in restraint of trade. As groups of competitors working together, trade associations are subject to particular antitrust scrutiny. ISA has a policy of strict compliance with federal and state antitrust laws. ISA members should avoid discussing certain subjects when they are together – both at formal ISA meetings and in informal contacts with other industry members – and should otherwise adhere strictly to the guidelines that follow.

ISA members should always avoid conduct which would violate the antitrust laws in the ordinary course of business, such as:

- ◆ *Price-Fixing, Bid-Rigging and Resale Price Maintenance*, which are *per se* illegal;
- ◆ *Group Boycotts*, which also are generally *per se* illegal;
- ◆ *Tying and Reciprocity*, or the sale of one service or commodity on the condition that the customer also must buy some other service or commodity from the seller, which may be illegal under certain circumstances;
- ◆ *Exclusive Dealing Agreements*, which provide that a buyer will purchase its full requirements from a single seller or that a seller will commit its output to a single buyer, also may be illegal under certain circumstances;
- ◆ *Price Discrimination*, which is often illegal under the Robinson-Patman Act;
- ◆ *Monopolization and Attempts to Monopolize*; and
- ◆ *Unfair Methods of Competition*.

C. Annual ISA Membership Dues

Annual membership dues are \$8200 per member firm (annual revenue \$2M+ annually; \$5400 for annual revenue of less than \$2M annually). Membership dues may be paid in quarterly installments by credit card. Quarterly payments will be charged against the credit card on file on the first day of the first month of each quarter. Late payment will be subject to a 10% service charge.

Amount of check attached or credit card payment \$ _____

____ American Express ____ MasterCard ____ VISA

Credit card # _____ Exp _____

Signature _____

Would you prefer quarterly dues installments? ____ YES ____ No
Please sign here to authorize quarterly credit card charges to the card on file.

- D. Annual Financial Survey** - ISA values sharing among member firms. ISA's Financial Survey is a core business sharing aspect of ISA membership. All information is handled anonymously and confidentially by a third party research firm. This is the only survey of its kind in the industry.

As a member, will you make every effort to participate in the annual ISA Financial Survey?
____ Yes ____ No

- E. Annual Business Retreat** - ISA holds its Annual Business Retreat in the spring each year. ISA's Annual Business Retreat gives senior leaders a chance to focus on the business rather than working in it! Over the course of three days, educational sessions are offered on such issues as financial performance, product development, customer loyalty, employee hiring and retention, copyright issues and more. Facilitated networking sessions allow small groups of owners and senior executives to work together, sharing perspectives and solving problems unique to the industry. Attendance by your firm's designate and CEO is important.

Who will be attending the Annual Business Retreat from your firm? _____

- F. C-Level Forums** - ISA members convene to "dig deep" on self-selected issues at ISA C-Level Forums. Led by experienced CEO group facilitators, small groups explore insights and potential solutions/options about their individual issues.

Who will be attending C-Level Forums? _____

- G.** By signing this application you agree to support and uphold the Vision, Mission, Imperatives and Values as stated on page three of this application.

Designate's Signature

Title

Date

Please return your completed form and check/credit card payment to:

**ISA-The Association of Learning Providers
5868 Mapledale Plaza #120, Dale City, VA 22193 - FAX 703.730.2857**