

# MEMBERSHIP FORM



THE  
**ASSOCIATES**  
Asper School of Business

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Alumni:  Asper Alum  Asper MBA  U of M Alum  Other

Professional Designations: \_\_\_\_\_

Professional Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Referred By: \_\_\_\_\_

*As an Associate, you permit your **name** and **company** to be publicly available and your **name, title, company, mailing address, telephone, email, and web site** available to members only.*

**Associates have indicated they receive the following benefits with membership. Please indicate which reason(s) best describes why you want to be an Associate.**

Supporting Business Education

Networking Opportunities

Engaging with Asper Students & School

Continuing Education & Programs

Other: \_\_\_\_\_

## MEMBERSHIP FEE

The contribution of **\$1300** annually is both a charitable donation and membership fee. \$1,075 charitable tax receipt and a \$225 business receipt that entitles the Associate to participate in all events and programs at no additional cost with the exception of IDEA.

## PAYMENT METHOD

**Cheque Payable to:** The University of Manitoba Business School Foundation Inc.  
547-181 Freedman Cres, University of Manitoba, Winnipeg, MB R3T 5V4

## Visa / MasterCard:

Card No: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / \_\_\_\_\_ Cardholder: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# ASSOCIATES PROFILE

[associatesmb.ca](http://associatesmb.ca)

**285 +**

**MEMBERS**

**58%**

**C-SUITE EXECUTIVES**

**30%**

**PARTNER, VICE-PRESIDENT**

**12%**

**DIRECTOR, SENIOR MANAGER & OTHERS**

**44%**

**ASPER ALUMNI**

**19%**

**U OF M ALUMNI**

**37%**

**NON-ALUMNI**

**COMMITTED TO EXCELLENCE**  
IN BUSINESS EDUCATION

