



# 2023 WBP AFFILIATE MEMBERSHIP PROSPECTUS

Airports Council International - North America

## MEMBER BENEFITS

- Designation as an ACI-NA World Business Partner Affiliate Member in the ACI-NA database
- Members-only e-mail communication from the ACI-NA staff (meeting announcements, press releases, industry updates, etc.)
- ACI-NA *Centerlines* quarterly magazine (electronic version only)
- Listing in the ACI-NA Online Buyers Guide
- Member registration rates at all ACI-NA conferences and events
- Member exhibit rates at all ACI-NA exhibitions
- Participation in ACI-NA committees
- Participation in ACI-NA Speakers Bureau

### Exclusions

The following benefits are **not** available to World Business Partner Affiliate Members:

- Official Representative or Alternate Representative voting rights on ACI-NA World Business Partner issues or Board Elections
- Participation on ACI-NA World Business Partner/Associates Board of Directors
- Opportunity to participate in ACI-NA steering groups

## MEMBERSHIP PRICING

Annual dues for an ACI-NA Affiliate Member are **\$1,095 USD**.

All memberships are corporate. The company is considered the member and benefits are extended to all of the Member Company's employees. Membership is on a calendar year basis, beginning January 1 and ending December 31. Membership must be renewed each year. Membership Benefits become effective upon receipt of full dues payment. All dues are quoted in U.S. Dollars.

## PAYMENT

Please email your completed application form [memberservices@airportscouncil.org](mailto:memberservices@airportscouncil.org). Membership questions can be directed to Veronica Gerson [vgerson@airportscouncil.org](mailto:vgerson@airportscouncil.org).

Once your application has been processed, an invoice will be generated and sent to you for payment. Association dues are invoiced annually and are due upon receipt of invoice. Once remitted, payments are non-refundable.

Form and payment may also be submitted via mail to:

ACI-NA  
P.O. Box 5007  
Client ID 500022  
Merrifield, VA 22116-5007



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## NEW MEMBER INFORMATION

Please complete this portion of the application with the official corporate name and address you wish to use for your membership.

### CORPORATE INFORMATION

**ACI Region** (please select one):      **ACI Africa**      **ACI Asia-Pacific**      **ACI Europe**      **ACI Latin**

Organization: \_\_\_\_\_

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

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

City, State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Main Telephone: \_\_\_\_\_ Main Fax: \_\_\_\_\_

Organization Web Site: \_\_\_\_\_

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

### REPRESENTATIVES INFORMATION

Please complete as thoroughly as possible. The information you provide will be used to update the ACI-NA/ACI databases and membership directories. Please select **two** representatives from your organization to be contacts for ACI-NA.

Official Representative (primary contact)

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

Company \_\_\_\_\_

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

City, State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Alternate Representative (alternate contact)

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

Company \_\_\_\_\_

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

City, State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_



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## COMMITTEE REPRESENTATIVE

ACI-NA Members are strongly encouraged to participate on ACI-NA Committees which are relevant to their respective businesses. It is extremely beneficial and important that you assign a representative (include title and email) to these 15 committees. Committee members regularly receive updates on committee activities. Please click on the committee names below for additional information.

[Air Cargo](#)

[Air Service](#)

[Business Diversity](#)

[Business Information Technology](#)

[Commercial Management](#)

[Commissioners](#)

[Environmental Affairs](#)

[Facilitation](#)

[Finance](#)

[Human Resources](#)

[Legal Affairs](#)

[MarComCX](#)

[OPSID](#)

[Public Safety & Security](#)

[Risk Management](#)

## COMPANY DESCRIPTION

Please submit a brief description of your company. Information will be used in various ACI-NA publications. Limit description to 50 words or less.

Description: