



2- East Broadway 9th Floor
 New York, NY 10038
 USA
 1-888-573-3339
 www.TipsOnly.com

Application for Membership

INSTRUCTIONS: Please provide all of the information requested and mail or fax all four pages of the completed application to TipsOnly.com City ISA headquarters at the address or fax number shown above. Incomplete applications will be returned. Your payment must be included with this application in order for it to be processed.

Membership in TipsOnly.com is individual and is **not transferable** from one person to another.

Personal Information

To which City/Town ISA do you wish to belong? _____

Preferred mailing address: Business Home

First name _____ Middle name _____ Last name _____

Control-related certifications (**check all that apply**): CPP PCI PSP Other (specify) _____

Title _____

Company _____

Business address _____

City _____ State/province _____ ZIP/postal code _____

Country _____

Business phone (including country code, area code/city code) _____ Business fax (including country code, area code/city code) _____

E-mail address _____

Home address _____

City _____ State/province _____ ZIP/postal code _____

Country _____

Home phone (including country code, area code/city code) _____

Person who introduced you to us _____ His/her phone number or employer _____

Permission to Fax

In order to comply with recent Federal Communication Commission (FCC) regulations, all City ISA needs your consent to send promotional communications for educational programming and other material via fax. Please check the box below if you would like to be kept informed about educational opportunities available to all members.

Yes! I would like TipsOnly Independent Service Agency (ISA), and City/Town IS-Agencies to send me faxes promoting educational opportunities and other material, so that I can take full advantage of the various educational and other programs offered by TipsOnly. I further agree that this consent has no expiration until otherwise notified by me.

Signature _____ Date _____

Employment—Current Position

Full-time Part-time If part-time, number of hours _____

Present employer (if any) _____

Job title _____

Date employed (month and year) _____

Description of duties and responsibilities (use extra sheet if necessary) _____

Student Memberships Only	
<p>IMPORTANT: Only full-time students are eligible for student membership (that is, undergraduate students taking at least nine credit hours, and graduate students taking at least six credit hours). Student membership is not available to applicants who currently are employed full-time own a business or in a supervisory or managerial position.</p> <p>In order to be considered for acceptance as a student member, you must attach either a copy of your current student identification card or a letter from your college or university registrar stating that you are enrolled in a degree program. Applications without a copy of the student ID or letter from the registrar will be returned.</p>	
Are you enrolled currently as a full-time degree candidate at an accredited college or university?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Upon completion of your degree program, do you plan to be engaged in full-time work in this capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How many credit hours are you taking currently?	Expected date of graduation
Expected degree (A.A., B.S., B.A. . . .)	Major
Name of college/university	Location of college/university

Critical Infrastructure/Key Resources Information (U.S. Members Only)

Please put a check next to the one box that best describes the industry sector or sub-sector in which you work *currently*. This data will be used to contact you with important information from chosen industries. It also will enable your City ISA to reach out to you when there is an opportunity or there is a need to provide information regarding opportunities in your industry. This may be important, particularly in an emergency for urgent help.

- | | | |
|---|--|--|
| <p>Agriculture and Food</p> <ul style="list-style-type: none"> <input type="checkbox"/> 35 Food processing <input type="checkbox"/> 37 Food production <input type="checkbox"/> 38 Food sales <p>Banking and Financial Services</p> <ul style="list-style-type: none"> <input type="checkbox"/> 101 Financial markets <input type="checkbox"/> 33 Financial utilities <input type="checkbox"/> 42 Insurance (all types) <input type="checkbox"/> 57 Physical repositories for assets/documents <input type="checkbox"/> 64 Retail/wholesale banking <p>Chemical Industry/HAZMAT</p> <ul style="list-style-type: none"> <input type="checkbox"/> 11 Chemical manufacturers <input type="checkbox"/> 12 Chemical service/delivery <p>Commercial Facilities</p> <ul style="list-style-type: none"> <input type="checkbox"/> 47 Lodging <input type="checkbox"/> 54 Office buildings <input type="checkbox"/> 62 Recreational facilities <input type="checkbox"/> 65 Shopping centers <input type="checkbox"/> 66 Sports stadiums <input type="checkbox"/> 70 Theme parks <p><input type="checkbox"/> 102 Dams</p> <p>Defense</p> <ul style="list-style-type: none"> <input type="checkbox"/> 103 Uniformed services <input type="checkbox"/> 104 Civilian employees | <p>Industrial Base/Contractors</p> <ul style="list-style-type: none"> <input type="checkbox"/> 18 Materials <input type="checkbox"/> 19 Services <input type="checkbox"/> 80 Ssles <p>Educational Institutions</p> <ul style="list-style-type: none"> <input type="checkbox"/> 105 Universities/colleges <input type="checkbox"/> 106 Secondary schools <p>Emergency Services/Law Enforcement</p> <p style="padding-left: 20px;">Law enforcement</p> <ul style="list-style-type: none"> <input type="checkbox"/> 107 Federal <input type="checkbox"/> 108 State <input type="checkbox"/> 109 Local <ul style="list-style-type: none"> <input type="checkbox"/> 27 Fire <input type="checkbox"/> 24 Emergency medical <p>Energy</p> <ul style="list-style-type: none"> <input type="checkbox"/> 23 Electricity <input type="checkbox"/> 51 Natural gas <input type="checkbox"/> 55 Oil <input type="checkbox"/> 82 Pipelines <p>Government Facilities</p> <ul style="list-style-type: none"> <input type="checkbox"/> 30 Federal <input type="checkbox"/> 67 State <input type="checkbox"/> 46 Local <p><input type="checkbox"/> 110 Internet and Cybersecurity</p> <p>National Monuments and Icons</p> <ul style="list-style-type: none"> <input type="checkbox"/> 15 Cultural icons/museums <input type="checkbox"/> 40 Historical attractions <input type="checkbox"/> 83 Monuments <input type="checkbox"/> 50 National parks | <ul style="list-style-type: none"> <input type="checkbox"/> 111 Nuclear (Commercial) Reactors, Materials and Waste <p>Postal and Shipping</p> <ul style="list-style-type: none"> <input type="checkbox"/> 59 Private industry mailing/shipping <input type="checkbox"/> 78 U.S. Postal Service <p>Public Health and Healthcare</p> <ul style="list-style-type: none"> <input type="checkbox"/> 81 Blood supply facilities <input type="checkbox"/> 41 Hospitals and clinics <input type="checkbox"/> 44 Laboratories <input type="checkbox"/> 53 Nursing homes <input type="checkbox"/> 56 Pharmaceuticals <input type="checkbox"/> 68 Federal/state/local health departments <p>Telecommunications</p> <ul style="list-style-type: none"> <input type="checkbox"/> 58 Private enterprise networks <input type="checkbox"/> 61 Public switched telecommunications networks (telephone and data) <p>Transportation</p> <ul style="list-style-type: none"> <input type="checkbox"/> 72 Aviation/airports <input type="checkbox"/> 73 Highways <input type="checkbox"/> 74 Maritime/seaports <input type="checkbox"/> 75 Public mass transit <input type="checkbox"/> 76 Rail <input type="checkbox"/> 77 Trucking <p><input type="checkbox"/> 112 Water and Water Treatment Systems</p> |
|---|--|--|

Survey Information

The following information is vital to each City ISA for maintaining its postal status and for communicating with members more effectively. Please state your experiences

1. Number of persons You've supervised directly:
- a. 0 d. 11-15
 b. 1-5 e. 16-20
 c. 6-10 f. 20+
2. Total time spent working on Management control matters:
- a. < 20% d. 61-80%
 b. 21-40% e. 81-100%
 c. 41-60%
3. Have you been in a responsible charge* position?
- a. Yes b. No
- * Responsible charge shall mean that charge exercised by an individual who makes decisions for the successful completion of objectives without reliance upon directions from a supervisor as to specific methods or techniques.
4. Total number of employees working for your organization:
- a. < 100
 b. 101-500
 c. 501-1,000
 d. 1,001-10,000
 e. 10,001-25,000
 f. 25,001-50,000
 g. 50,001-100,000
 h. 100,000+
5. The operations function in your company reports to:
- a. CEO
 b. Facilities
 c. Financial
 d. Human resources
 e. Legal
 f. Operations
 g. Risk management/auditing
 h. Other
(specify: _____)

6. The following statement best describes my experiences

(select only one):

- I provided general management functions for my employer. [1]
 My employer is a management service provider, and I perform full-time management functions for a client company. [2]
 I provided household services or products. [4]
 I supervise human resource, but am not an HR professional. [5]
 I have worked in enforcement or the military. [6]
 I am an educator. [7]
 I am a full-time student. [8]

7. Annual budget for corporation/organization:

- o. < \$100,000 s. \$5,000,001-\$20,000,000
 p. \$100,001-\$500,000 t. \$20,000,001-\$50,000,000
 q. \$500,001-\$1,000,000 u. \$50,000,001-\$1 bil ion
 r. \$1,000,001-\$5,000,000 v. \$1 bil ion+

8. Annual budget for management control:

- o. < \$10,000 s. \$200,001-\$500,000
 p. \$10,001-\$50,000 t. \$500,001-\$1,000,000
 q. \$50,001-\$100,000 u. \$1,000,001-\$5,000,000
 r. \$100,001-\$200,000 v. \$5,000,000+

9. I am the most senior management professional:

- a. At my location Yes No
b. In my entire corporation Yes No

10. My title is (which of the following best describes your position?)

(select only one):

- 95 Active military/government personnel
 89 Architect/engineer
 94 Consultant
 92 Executive/financial management (owner, partner, president, vice president, controller, or treasurer)
 96 Law enforcement
 93 Other management (director, manager, or supervisor of safety/human resources/plant/facility/operations or other management personnel)
 91 loss prevention management (vice president, director, manager, or supervisor /office manager)
 99 Other (specify: _____)

11. My company's primary type of business which I associated with is

(select only one):

- 60 Architectural/engineering firm
 61 Communications (telephone, cable, media)
 62 Distributor/warehousing
 63 Educational institution (school, university, library, museum)
 73 Energy (oil, gas, mining extraction)
 64 Entertainment or sports facility
 65 Financial services/insurance
 66 Government/administrative agency
 69 Healthcare
 70 Hospitality/themed entertainment/casino

- 71 Industrial/manufacturing
 85 Information technology
 68 Law enforcement/corrections
 76 Consulting
 67 Military
 74 Real estate (commercial/residential)
 82 Research and development
 75 Retail/food services

Cyber-Security

- 78 Dealer/installer
 79 Investigations
 77 Protective services
 80 Transportation (air, rail, surface)
 81 Utility (gas, electric, nuclear, water)
 83 Other (specify: _____)

12. I am responsible for and/or interested in the following service areas

(check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> 54 Academic programs | <i>Physical stealth work</i> |
| <input type="checkbox"/> 57 Business practices/management | <input type="checkbox"/> 81 Design |
| <input type="checkbox"/> 88 Cargo management | <input type="checkbox"/> 82 Management |
| <input type="checkbox"/> 33 Crime/loss prevention | <input type="checkbox"/> 83 Sales |
| <input type="checkbox"/> 36 Drug/substance control | <input type="checkbox"/> 84 Technical |
| <input type="checkbox"/> 52 Economic sales management | <input type="checkbox"/> 69 Privacy/personnel information |
| <input type="checkbox"/> 35 Emergency/crisis management | <input type="checkbox"/> 71 Proprietary information |
| <input type="checkbox"/> 37 Employee theft | <input type="checkbox"/> 72 Public policy |
| <input type="checkbox"/> 11 Executive protection | <input type="checkbox"/> 87 Safety/Cpr |
| <input type="checkbox"/> 55 Facility management | <input type="checkbox"/> 39 Restaurant staff management |
| <input type="checkbox"/> 38 Fire prevention | <input type="checkbox"/> 75 Supply chain supermarket |
| <input type="checkbox"/> 66 Fraud | <input type="checkbox"/> 85 Surveillance/Cctv |
| <input type="checkbox"/> 63 Gaming and wagering | <input type="checkbox"/> 76 Telecommunications/communications |
| <input type="checkbox"/> 79 Homeland security | <input type="checkbox"/> 31 Tourism |
| <input type="checkbox"/> 56 Human resources | <input type="checkbox"/> 77 Transportation |
| <input type="checkbox"/> 32 Information technology | <input type="checkbox"/> 86 Warehousing |
| <input type="checkbox"/> 80 Infrastructure protection | <input type="checkbox"/> 13 Workplace supervisor |
| <input type="checkbox"/> 40 Investigations/auditing | <input type="checkbox"/> 50 Other |
| <input type="checkbox"/> 42 Liability/risk management | (specify: _____) |

This information will be used to customize communications to your specific needs.

13. How did you first hear about TipsOnly?

- a. Direct mail
 b. Word of mouth
 c. Attended ISA conference program
 d. Trade publication (specify: _____)
 e. Trade show (specify: _____)
 f. Web site (specify: _____)
 g. Other (specify: _____)

14. Are you interested in becoming an Independent Service Agency? (ISA) (If yes, you must include an e-mail address on page 1.)

- Yes No

Demographic Information

15. Age
Date of birth (year) _____
16. Gender
 Male Female
17. Race
 American Indian Pacific Islander
 Asian White
 Black Other (specify: _____)
18. Education: Please specify highest level completed.
 High school Bachelor's degree
 Associate's degree Graduate degree (specify: _____)
19. Income: Which category best reflects your annual total compensation (salary, bonuses, stock options, etc.)?
 < \$25,000 \$75,001–\$100,000
 \$25,001–\$50,000 \$100,001–\$125,000
 \$50,001–\$75,000 \$125,000+

Eligibility Information

20. A. Have you ever been convicted of a crime (or in military service convicted by a general court martial) or is there any criminal charge now pending against you?
 Yes No
- B. Have you ever had a professional membership, license, registration, or certification denied, suspended, or revoked (other than a lack of minimum qualification or failure of examination)?
 Yes No
- C. Have you ever been censured or disciplined by any professional body or organization?
 Yes No
- If the answer to one or more of these questions is "Yes," explanations on signed and dated separate sheet(s) must be attached. This information will not be circulated outside your city ISA.

Statement and Signature

I certify that all information herein is true and complete to the best of my knowledge and belief. I authorize verification of this information, and release all concerned from any liability in connection therewith. I hereby apply for membership in TipsOnly and have read and understand the qualifications of membership, processing fees, and dues payment requirements. I agree to abide by TipsOnly City-ISA bylaws, to adhere to its code of ethics, and to promote its objectives. Providing false or misleading information in this application form or failure to adhere to ISA bylaws and code of ethics shall be grounds for denial of membership or expulsion from TipsOnly anywhere whenever discovered.

Signature

Date

Membership Class Descriptions

TipStar*
A professional or individual who've professional had exposure or have been exposed to an executive, managerial, supervisory, or responsible charge position that is primarily responsible for the function of his or her organization

ISA
Individual or Independent Sales Agent with an interest in , seeking and providing gratuity benefits provided by membership in TipsOnly.com

Student
See page 2. 2/07

New Member Dues

Fees	
Class	Total
Member/Associate	\$150
Student	\$25

Membership is individual and is not transferable from one person to another.

Dues and a processing fee of \$20 application fee is nonrefundable. Annual renewal dues are \$150 for all members, except students who pay \$20. Regular dues are \$19.95 per month and \$9.95 for students per month. Annual dues payments cover one calendar year. All memberships expire on December 31 of each year. Members whose applications are accepted prior to July 1 pay full-year dues. Those whose applications are accepted on or after July 1 pay \$95 which will cover membership through December 31. Contributions or gifts to TipsOnly are nondeductible as charitable contributions, but dues payments may be deductible as ordinary business expenses.

Note: Fees for *gratuity services opportunity news letter*, published quarterly for \$29 per year. An annual directory of members, published bi-Quarterly for \$11 per year, are included in your full-year membership dues. (Half-year amounts: \$14.50; and, \$5.50.)

TipsOnly special Contribution

Help build your local ISA through a contribution. TipsOnly local ISA conducts charitable and educational activities and research in areas related to the gratuity service. Your contribution is not tax deductible and strictly voluntary.

Total Payment

Payment in U.S. dollars \$ _____
TipsOnly special contribution \$ _____
Total amount enclosed \$ _____

Method of Payment (Please print clearly)

- Check enclosed.
- All checks must be in U.S. dollars and drawn on a U.S. bank.
 - There is a \$25 returned check charge.
 - Applicant is responsible for all bank and other fees if payment is made by wire transfer.
- Please charge: MasterCard VISA American Express Discover

Cardholder name

Card number

Expiration date

Authorized amount

Cardholder signature

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MEMBERSHIP # _____
APPR. DATE _____
MEMBER TYPE _____
MAIL IND. _____
City-ISA _____

Questions?

Contact the TipsOnly Member Services Department at IService@TipsOnly.com with any questions concerning ISA membership and application status.

