IMMA
Indiana Municipal Management Association
A State Affiliate of ICMA

2019 CORPORATE MEMBERSHIP

What is IMMA?

The Indiana Municipal Management Association (IMMA) is a non-profit, non-partisan organization composed of City and Town Managers, Chief Administrative Officers, and Assistant and Deputy Managers. Funding is provided by annual dues paid by the individual members. The organization is governed by a nine member Executive Board and managed by an Executive Director.

The purpose of IMMA is to support municipal and county management and to strengthen and promote professional local government management in Indiana. IMMA is committed to providing training, networking opportunities, resources and technical assistance to municipal managers and administrators throughout Indiana. It is imperative that we provide those cities and towns that currently employ or seek professional local government managers with the most qualified and best trained in the profession. IMMA is affiliated with Aim – Accelerate Indiana Municipalities and the International City/County Management Association (ICMA). These professional associations provide valuable training and resources to the IMMA membership. In addition, IMMA offers a number of training and networking opportunities throughout the year to members.

Being a corporate member of the Indiana Municipal Management Association (IMMA) is designed to provide your organization with many unique opportunities. Each member will be able to interact with municipal managers from all around the state of Indiana. These managers are responsible for the operation of municipalities, including economic development, public safety, purchasing, contracts and personnel. The benefits of membership are listed under each category to the right. Each membership is valid for one (1) year. If your company does business with municipal government, you cannot afford to miss the opportunities provided by IMMA through its Corporate Membership Program. The choice is good for your business, and good for municipal government.

To learn more, contact Erin Jamison-Koenig: 317.237.6200 / ejamisonkoenig@aimindiana.org.

IMMA Corporate Membership

GOLD MEMBER ($1,000)
- Two (2) individual memberships in IMMA
- Two (2) complimentary registrations for the IMMA Annual Conference
- Prominent display of company name/logo on IMMA Annual Conference signage
- Two invitations to dinner with IMMA members during the IMMA Annual Conference
- A contact listing of all IMMA members

SILVER MEMBER ($750)
- One (1) individual membership in IMMA
- Display of company name/logo on IMMA Annual Conference signage
- A contact listing of all IMMA members

BRONZE MEMBER ($500)
- One (1) individual membership in IMMA
- A contact listing of all IMMA members

IMMA Annual Conference Sponsorships

Sponsorship Opportunities
- Dinner on Wednesday, May 1 ($500)
- Awards Reception on Thursday, May 2 ($250)
- Dinner on Thursday, May 2 ($500)

All conference sponsorships will be acknowledged on the conference agenda and verbally throughout the event.

The deadline for sponsorships is Tuesday, April 16. This deadline ensures the sponsor information is included in the signage and conference agenda.

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Please accept this application for IMMA Corporate Membership. It is understood that in return for our support of the IMMA, we are entitled to receive the benefits listed in the attached information. Acceptance as a Corporate Member does not constitute or imply IMMA or Aim endorsement of our products or services by IMMA for Aim members, officers or staff. Information presented on this form will be used to publish information to IMMA members (including website listing). All memberships are one year memberships.

Company Name

Main Contact – Name & Title

Address

City State Zip Code

Phone Number Email

Secondary Contact – Name & Title

Phone Number Email

Please provide a brief description of business.

Please enclose payment with application and return to:
IMMA
125 W Market Street, Suite 100
Indianapolis, IN 46204

Please make checks payable to Aim.

Paying by: □ Check #_____ □ Credit Card
□ Mastercard □ Visa □ Discover □ American Express Amount: _____
Card Number: _____
Expiration Date: _____ Security Code: _____
Name on Credit Card: _____
Billing Address of Credit Card: _____
Signature: _____