



**SATELLITE INDUSTRY ASSOCIATION:
STATE OF THE SATELLITE INDUSTRY
REPORT ORDER FORM**

FIRST NAME: _____ LAST NAME: _____

COMPANY: _____ JOB TITLE: _____

BILLING/MAILING ADDRESS: _____ SUITE # _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ EMAIL: _____

I AM A CURRENT MEMBER OF SIA AND WOULD LIKE A COMPLEMENTARY
"STATE OF THE SATELLITE INDUSTRY REPORT" EMAILED TO ME

I WOULD LIKE TO PURCHASE AN OLDER "STATE OF THE SATELLITE INDUSTRY REPORT" FOR \$1,000

2015 2016 2017 2018 2019

PAYMENT AGREEMENT- SIGNATURE OR ELECTRONIC SIGNATURE BELOW SIGNIFIES AN AGREEMENT FOR A ONE-TIME FEE OF \$1,000 BE CHARGED TO THE SIGNATORY. SIA WILL ACCEPT CHECK OR PAYMENT MADE VIA CREDIT CARD. PLEASE CONTACT JWILLIAMS@SIA.ORG WITH QUESTIONS.

PLEASE SEND ALL FORMS TO INFO@SIA.ORG

PRINT NAME: _____ COMPANY: _____

BILLING POC NAME & EMAIL (IF DIFFERENT THAN ABOVE): _____

SIGNATURE: _____ DATE: _____

PAYMENT INFORMATION

NAME ON CARD: _____

CREDIT CARD # _____ EXP: _____ CVV CODE: _____