

SATELLITE INDUSTRY ASSOCIATION:

STATE OF THE SATELLITE INDUSTRY REPORT ORDER FORM

First Name:	st Name:Last Name:						
Company:							
Billing/Mailing Addre			Suite #				
City:	State	e:	Zip Code:				
Telephone: E				Email:			
□ Ia "S	nm a current State of the S	member o Satellite Ir	of SIA and ndustry R	would like Report" en	e a comple nailed to n	mentary ne	
I would like to pu	rchase an olo	der "State o	of the Sate	ellite Indus	try Report	" for \$1,250	
□ 2016	2017	2018	2019	□ 2020	□ 2021		
PAYMENT AGREEME	NT- Signature	or Electroni	c Signature	e below signi	fies an agree	ement.	
Please send all forms	to info@SIA.o	org					
Print Name:		Company:					
Billing POC Name & E	mail (if differe	nt than abov	e):				
Signature:)ate:			
Payment Information							
Name on Card:							
Credit Card #			e	хр:	_CVV code:_		