



First Name		Last Name	
Title		Company/Firm	
Street Address 1		Street Address 2	
City	State/Province	Zip/Postal Code	Country
Phone (Office)		Phone (Cell)	
Email (Business)		Email (Personal)	
Were you referred? If so by who?			

Are you interested in sponsorship opportunities? Yes No

Primary Profession

Please select one

- | | | |
|-----------------------------|-----------------------------|----------------------------|
| Accountant | Legal Advisor – Other | Factor |
| Financial Advisor | Auctioneers & Appraisers | Cash-Flow Lender |
| Turnaround Manager | Receiver | Workout Officer |
| Investment Banker | Trustee | Lender – Other |
| Chief Restructuring Officer | Liquidator – Other | Claims & Noticing Agents |
| Financial Consultant Other | Private Equity Funds | Public Relations |
| Debtor | Distressed Hedge Funds | Service Provider – Other |
| Unsecured Creditor | Distressed Investor – Other | Judicial and/or Government |
| Secured Lending & Finance | Asset Based Lender | Academic & Faculty |
| In-House Counsel | DIP Lender | Student |
| | | Other or Not Specified |

Professional Information

Profile information below will be displayed in the online TMA directory.

If you do not wish to be listed in the directory, please check here:

Primary Occupation (check 1)

- | | | | |
|--------------------|-------------------------|-------------------------|--------------------|
| Academic | Banker | Investor | Sales/Business Dev |
| Accountant | Consultant/Practitioner | Judicial | Student |
| Appraiser | Factor | Lender | Trustee |
| Asset Based Lender | Financial Advisor | Liquidator | Workout Officer |
| Attorney/Legal | Government | Receivables Management/ | |
| Auctioneer | Interim/Crisis Manager | Collections | |

Specialization (Check all that apply)

Administration	Debtor Rep	Mergers & Acqs.	Strategic Planning
Bankruptcy	Early Decline	Mid-term Decline	Trustee/Examiner
Chapter 7	Evaluations	Operations	Turnaround/Restructuring
Chapter 11	Hedge Funds	Private Equity	Valuation/Appraisal
Corporate Renewal	Late Decline	Receiverships	Workouts
Creditor Rep	Liquidation		

Industry (check all that apply)

Advertising/Marketing	Energy/Fuel	Medical/Pharmaceutical	Tech/Information
Branding	Environmental	Metals	Technology
Aerospace/Defense	Finance	Non-Profit	Telecommunications
Agriculture	Food & Beverage	Publishing/Media	Textiles/Apparel
Automotive	Government	Real Estate Restaurant	Transportation
Banking/Finance	Health Care	Restructuring	Utilities
Construction	Hospitality/Hotels	Retail	Wholesale
Consumer Products/Goods	Insurance	Service Business	
Distribution	Internet/E-commerce		
Entertainment	Manufacturing/Industrial		

Preferred Chapter (check one)

Alabama	Connecticut	Missouri	Pittsburgh
Arizona	Dallas/Ft. Worth	Montreal	Rocky Mountain
Atlanta	Detroit	New Jersey	S. Ohio/N. Kentucky
California [Northern]	Florida	New York City	Tennessee
California [Southern]	Houston	Northeast	Toronto
Carolinas	Indiana	Northern Ohio	Upstate New York
Central Texas	Long Island	Northwest	West Michigan
Chesapeake	Louisiana	Philadelphia	
Chicago/Midwest	Minnesota		

Membership Category

Member	\$395 USD
NextGen	\$200 USD
(New Members, 40 & Under)*	
Government/Academic**	\$125 USD
Student***	\$0 USD

Please select the category that best applies to you.

A saved payment method below is required.

Membership during your trial period is \$0.

- * Next Gen applicants: must be new members ago 40 and under At time of application. Discount is available for 2 years or until Age of 41. Existing TMA members are not eligible.
- ** Gov/Academic applicants: your primary employer must be a Government, judicial, or academic institution.
- *** Student applicants: must be a full-time Student, proof of enrollment required.

Demographic Information

Please provide the below demographic data for internal use only.

Year Born:	Gender:
	Male
	Female
	Prefer not to Answer

Diversity Programming Interests

Women's Professional Networking (TMA NOW)
NextGen
Minorities in Turnaround/Restructuring
LGBT

Method of Payment

American Express

Visa

MasterCard

Check (enclosed)

Total Payment \$ _____

Name on Card_____
Card Number_____
Expiration Date_____
CVV_____
Signature

By submitting your application, you confirm that you have read and agree with the TMA Code of Ethics found at turnaround.org

Email to:membership@turnaround.org

By placing my initials in this box, I acknowledge that I read and understand the auto renew terms and conditions below:

Auto Renew Terms and Conditions

I understand that my method of payment will not be charged at this time. My credit card information will be saved on my TMA member account and charged for renewal one business day before membership expiration. I also understand that changes to my Membership or billing information can be made at any time by clicking the "Manage Saved Payment Account" button in my password-protected member profile on turnaround.org.

I may also update this information by emailing membership@turnaround.org or calling TMA's Membership team at 1-312-578-6900 x2.