



Registration/Renewal Business/Organization \$120

Membership is for 365 days from date of payment.

How did you hear about KIIC? _____ **Registration Date:** _____

I am a: _____New KIIC Member _____Renewing KIIC Member

Business Name: _____

Type of Business: _____non-profit _____for profit corporation _____LLC _____sole proprietor _____Other

Date of Business Registration/Incorporation: _____ (if registration is pending, indicate as such)

Primary Contact Name: _____ **Title/Position:** _____

Address (include zip): _____

Email: _____ **Phone(s):** _____

Business Website: _____

Social Media Links: (facebook, twitter, Instagram, etc): _____

Staffing: _____ I am the only staff member of the company currently
_____ We employ/contract additional staff

Current # of Staff (incl yourself) _____FT employees _____PT employees Avg Salary: _____
_____contractors Avg Fees: _____

Financials: Date of most recently completed fiscal year: _____
Total expenses for most recently completed FY: \$ _____
Total revenues for most recently completed FY: \$ _____

Primary Genre of your entrepreneurial arts endeavors (If you work in multiple genres, indicate primary with #1; and so on)
_____*Music* _____ *Written Word* _____ *Written Word* _____ *Art Location (i.e. Museum, Art Center)*
_____*Dance* _____ *Creative Technologies* _____ *Jeweler* _____ *Multi-Disciplinary*
_____*Theater* _____ *Graphic Design* _____ *Culinary Arts* _____ *Other:* _____
_____*Film* _____ *Visual Art (Medium: _____)*

PRIMARY BUSINESS CONTACT (owner, director) OPTIONAL DEMOGRAPHIC INFO:

Keshet is a 501c3 non-profit organization. Please help us report back to our community partners by completing the following info:

Ethnicity: ___African American ___Asian ___Caucasian ___Hispanic ___Latino ___Multi-Racial ___Native American ___Other

Education: ___some high school ___completed high school ___some college ___completed college ___graduate school or above

Household Size: # of members in household _____

Yearly Household Income: ___\$0-\$11,770 ___\$11,771-14,999 ___\$15,000-19,999 ___\$20,000-24,999 ___\$25,000-29,999
_____\$30,000-34,999 ___\$35,000-39,999 ___\$40,000 and above

Briefly describe your business endeavor – **what do you do?**

What are your **short term goals** for your arts business / as an arts entrepreneur?

What are your **long term goals** for your arts business / as an arts entrepreneur?

As a Business/Organization Member, you can have up to 5 contacts under your membership that can take advantage of the all the KIIC Benefits! Please provide information for your additional contacts below.

2. Contact Name: _____
Title/Position: _____
Email: _____
Phone(s): _____

3. Contact Name: _____
Title/Position: _____
Email: _____
Phone(s): _____

4. Contact Name: _____
Title/Position: _____
Email: _____
Phone(s): _____

5. Contact Name: _____
Title/Position: _____
Email: _____
Phone(s): _____

Please send your completed registration form along with payment to the address below.

4121 Cutler Ave NE, ABQ, NM, 87110
www.KeshetArts.org/KIIC
kiic@KeshetArts.org 505-224-9808

SG, 02.08.17
Date Pd _____ CRM data entered _____