ELIGIBILITY

The Minnesota Indian Gaming Association (MIGA) encourages all vendors and organizations involved in or allied with the tribal gaming industry to consider becoming an associate member of MIGA. Membership is open to for-profit and nonprofit organizations alike, regardless of size. Associate members are expected to meet the following expectations:

- Support tribal gaming as a means of promoting tribal sovereignty, economic development and self-sufficiency, as well as a means to strengthen tribal governments;
- Be an entity or person whose character, professional practices, prior activities, legal record, habits, or associations do not pose a threat to the public interest or the good reputation of tribal gaming;
- Support the general goals and policy positions of MIGA; and
- > Pay a membership fee each year in accordance with the MIGA associate membership dues structure.

APPLICATION PROCESS

- Fill out an associate membership application in its entirety.
- 2. If you are an organization operating within the state of Minnesota for less than 18 months, then your membership application must be sponsored by a MIGA member-tribe. Tribal sponsorship entails a member-tribe of MIGA vouching for the integrity of your organization. Tribal sponsorship must come from a senior official within a tribal government or tribal gaming enterprise. If you need assistance obtaining a tribal sponsor, please contact Andy Platto, executive director, at 651-735-7181 or platto@nsamn.com.
- Mail application and check to:

Minnesota Indian Gaming Association Attn: Associate Membership Program P.O. Box 21353 Minneapolis, MN 55421

- 4. MIGA leadership and staff will review your application and submit it to MIGA's board of directors for approval. They reserve the right to request additional information.
- 5. MIGA's board of directors will consider your application. You will be notified of its decision in writing.
- 6. Your payment for dues will not be processed until your application has been approved by the board. In the rare event that an application has been rejected, the applicant's check will be returned.

MIGA Associate Member Application



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Please type or print legibly Applicant's business name: _____ Street address: Mailing address: ______ City: _____ State: _____ Zip: _____ Website: Primary representative: _____ Email: _____Phone: _____ Secondary representative: _____ Email: Phone: **Tribal Sponsor (if applicable)** Tribal sponsor: _____ Name of contact: Mailing address: ______ City: _____ State: ____ Zip: _____ Phone: _____ Email: _____ Membership Level (please select one and make check payable to: **Minnesota Indian Gaming Association)** \$10,000 charter associate member \$5,000 (organizations of \$5 million or more in annual revenue) \$2,500 (organizations between \$1 million and \$5 million in annual revenue)

\$1,000 (organizations of less than \$1 million in annual revenue)