



Membership Application

COMPANY NAME _____	Corporation _____
DBA (if any) _____	(C) _____ (S) _____ (LLC) _____
Years in Business _____	Partnership _____
Annual Sales 2009 _____	Sole Proprietorship _____
Annual Sales 2008 _____	Current Year Sales Trend in % _____

CEO _____
 Street _____
 City _____
 State _____ Zip Code _____
 Phone _____ Fax _____

Headquarters Address
 Street _____
 City _____
 State _____ Zip Code _____
 Phone _____ Fax _____

Buyer _____
 Phone _____ Fax _____
 Email Address _____

Primary Bank _____
 Contact Name at Bank _____
 Phone _____ Fax _____

Accounts Payable _____
 Phone _____ Fax _____
 Email Address _____

Resident agent: _____
 Street _____
 City _____
 State _____ Zip Code _____
 Phone _____ Fax _____

Major shareholders (> 10%) attach separate list if necessary

Shareholder name _____
 Street _____
 City _____
 State _____ Zip Code _____
 Phone _____ Fax _____

Shareholder name _____
 Street _____
 City _____
 State _____ Zip Code _____
 Phone _____ Fax _____

Please List Four (4) Credit References

Vendor _____
 Street _____
 City _____
 State _____ Zip Code _____
 Contact _____
 Phone _____ Fax _____
 Email Address _____

Vendor _____
 Street _____
 City _____
 State _____ Zip Code _____
 Contact _____
 Phone _____ Fax _____
 Email Address _____

Vendor _____
 Street _____
 City _____
 State _____ Zip Code _____
 Contact _____
 Phone _____ Fax _____
 Email Address _____

Vendor _____
 Street _____
 City _____
 State _____ Zip Code _____
 Contact _____
 Phone _____ Fax _____
 Email Address _____