

Membership Application



COMPANY NAME _____

CONTACT NAME _____

ADDRESS _____

PHONE _____ FAX _____ WEBSITE _____

BOARD OF DIRECTORS

Primary Representative _____ **Title** _____

Direct Phone _____ Direct Fax _____ Email _____

BOARD OF DIRECTORS

Secondary Representative _____ **Title** _____

Direct Phone _____ Direct Fax _____ Email _____

TECHNICAL COMMITTEE

Primary Representative _____ **Title** _____

Direct Phone _____ Direct Fax _____ Email _____

TECHNICAL COMMITTEE

Secondary Representative _____ **Title** _____

Direct Phone _____ Direct Fax _____ Email _____

CATEGORIES OF MEMBERSHIP *(Please check appropriate box or boxes. See Membership category and pricing information on previous page.)*

- 1. Regular Manufacturing Membership**
- 1a. Additional Brand Membership**
- 2. Associate Membership**
- 3. Testing House/Lab/Academic Membership**
- 4. Buying Group or Cooperative Membership**
- 5. Alliance Dealer Membership**

New member dues will be pro-rated for the quarter in which the member joins, based on the receipt of the first payment.

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BENEFITS AND RESPONSIBILITIES OF MEMBERSHIP CATEGORIES

	BOARD MEMBERSHIP	TECHNICAL COMMITTEE	MARKETING COMMITTEE	EDUCATIONAL COMMITTEE	UNDERLAYMENT COMMITTEE
Regular Member	YES Vote	YES Vote*	YES Vote**	YES Vote**	YES Vote**
Additional Brand Member	ATTEND Vote	YES Vote*	NO N/A	YES Vote**	YES Vote**
Associate Member	ATTEND*** No Vote	YES Vote	YES** Vote	YES** Vote	YES** Vote
Testing House/Lab/ Academic Membership	ATTEND*** General Sessions No Vote	YES N/A	YES** Vote	YES** Vote	YES** Vote
Alliance Dealers & Buying Groups	ATTEND*** General Sessions No Vote	YES** N/A	YES** N/A	YES** N/A	YES** N/A

* Membership as defined by the committee's current policies. Technical currently has a 1 person-1-vote policy.

** May be invited to join the committee as needed. In some cases there are a limited number of participants. It should be noted that the membership criteria of all committees is determined by the Board.

*** May be excluded from Regular Member deliberations as required.

IT SHOULD ALSO BE NOTED that attendance at meetings, by ANY category of membership, can be limited due to financial limitations, meeting space limits, the anticipated work load, etc.

MEMBERSHIP CATEGORIES: Please note that "Additional Label Regular Manufacturing Membership" is ONLY available to supplement a Regular Manufacturing Member. In order to complete the application process for this category, please complete a separate application for each and append these to the original application of the "sponsoring" member (i.e., the Regular Manufacturing Member) for processing.

Please Describe the business your company is engaged in: _____

Applicant certifies that he/she has read and understands the NALFA Bylaws and that he/she accepts them; and, if accepted into membership in NALFA, he/she agrees to observe and be bound by the provisions thereof. Applicant further agrees, if accepted into such membership, to pay all NALFA initiation fees, dues, and assessments when they are due.

APPLICANT (LEGAL NAME) _____

TITLE _____ DATE _____

SIGNATURE _____

PLEASE MAKE CHECKS PAYABLE TO NALFA AND SEND TO:

North American Laminate Flooring Association
Attn: Barbara Dodrill
1747 Pennsylvania Ave., NW,
Suite 1000,
Washington, DC 20006
Telephone: (202) 785-9500 FAX: (202) 835-0243

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