

APPLICATION FOR MEMBERSHIP

Company: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Key Contact Name: _____ Title: _____

Phone/(800#): _____ Fax: _____

E-Mail: _____ Web Address: _____

(Be sure to include e-mail and web address in order for links to be included in your web listing on the RIMA-I site.)

Provide a clear description of your company's business activities: _____

Type of Membership Applying For:

Platinum
(\$6,000)

Full/Active
(\$3,000)

Associate
(\$2,000)

Distributor
(\$250)

Affiliate
(\$0)

If a Distributor, please list who you distribute for *(required)*: _____

How did you hear about RIMA International? _____

Do you presently belong to any other clubs, associations or affiliations? Yes _____ No _____

If yes, please list *(required)*: _____

Please select a committee on which you would like to participate (*and this does mean 'active' participation*):

___ Nominations ___ Marketing/PR/Membership ___ Technical

___ Verification ___ International ___ Radiant Barrier Software Task Group

Signature of Applicant _____ Date _____

Title or Position _____

***NOTE: In order to process your application, all information on this form must be completed.
Please read and sign the RIMA International Code of Ethics and 'Full/Active' member
applicants please complete the Technical Data Compliance Form
and return them with application and payment to the address shown below.***