

APPLICATION FOR MEMBERSHIP

Company:						
Address:						
City:			State:	Zip:	C	ountry:
Key Contact Name:Title:						
Phone/(800#): Fax:						
E-Mail: Web Address:						
(Be sure to includ	le e-mail and web ad	ddress in order	for links to be inclu	ded in your	web listing on th	e RIMA-I site.)
Provide a clear description of your company's business activities:						
Name of Sponsoring Mer	mber Company: (if a	applicable)				
Type of Membership Applying For:						
(\$6,000)	(\$3,000)	Associate (\$2,000)	□ \$0-\$500,000 (\$ □ \$500,000-\$2M □ \$2M+ (\$2,000)	(\$1,250))	☐ Contractor (\$500)	(\$0)
NOTE: Distributor membership dues are based on annual revenue. To qualify for membership as a Distributor or Contractor, the manufacturer of your product must also be a member of RIMA International.						
If a Distributor or Contractor, 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):						
<u>Platinum, Full/Active and Associate Members Only</u> - Please select committee(s) of which you would like to actively participate: NOTE : Assignment to a committee requires a commitment to regular attendance at RIMA-I meetings.						
Nominations	PR/Marketing/l	Membership	Technical	l _	Strategic Allia	ance Committee
Verifi	cation	Inter	rnational	Code	& Legislative Co	ommittee
Signature of Applicant					Date	
Title or Position						
Please read ar	order to process y nd sign the RIMA In applicants, ple and return them wit	nternational Co ease complete	ode of Ethics and the Technical Data	'Full/Active a Complian	e' and 'Distribut' ace Form	

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