

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 inc	luded in your web l	listing on the RIMA-I site.)
Provide a clear description of your compar	y's business activities:		
Name of Sponsoring Member Company: (i	f applicable)		
	Type of Membership Applyin	g For:	
□ Full/Active (\$7,500)	☐ International Only (\$3,500) (do not distribute/sell in US)		☐ Affiliate (\$0)
How did you hear about RIMA Internationa	ıl?		
Do you presently belong to any other clubs, associations or affiliations? Yes No			No
If yes, please list (required):			
Full/Active Members Only - Please select of NOTE: Assignment to a committee requires a committee requires a committee requires and commit			ipate:
PR/Marketing/MembershipTechnical Strategic Alliance Committee		e Committee	
VerificationI	Code & Legislative Committee		
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.