



Global Market Development Center 719.576.4260 tel
 1275 Lake Plaza Drive 719.576-2661 fax
 Colorado Springs, CO 80906-3583 www.gmdc.org

Associate (Supplier/Manufacturer) Membership Application

General Merchandise OR Health Beauty Wellness

Our company hereby applies for Associate Membership in GMDC. With this application is our payment of \$2,750.00 (annual dues in the amount of \$2,500.00 + first-time start-up fee of \$250.00). It is understood that the full amount paid herewith is to be refunded to us in the event our application is not accepted. **If it is accepted, we agree to abide by the Bylaws of GMDC and to provide the necessary information required for the GMDC Online Directory.**

| | | | |
|--|--|-------------------------------------|-----------------------------------|
| If you are charging your membership, please complete credit card type: | | SELECT ONE: | |
| | | <input type="checkbox"/> Mastercard | <input type="checkbox"/> Visa |
| | | <input type="checkbox"/> Amex | |
| Card Number: | | Expiration Date: | Card Identification Number (CID): |
| Name on Card: | | | |
| <i>FOR GMDC OFFICE USE: Check #: Dated: Amount:</i> | | | |

| General Company Information | | | | | |
|--|---|-------------------------|--|------|--|
| Company to be Listed as: | | | | | |
| Company is a: | <input type="checkbox"/> Department <input type="checkbox"/> Division <input type="checkbox"/> Subsidiary | Of Parent Company Name: | | | |
| Company Mailing Address: | | | | | |
| City: | | State: | | Zip: | |
| Country (If Different From United States): | | Company Website | | | |
| Company Main Phone: | | Company Main Fax: | | | |
| M/WBE Certified: | <input type="checkbox"/> Yes <input type="checkbox"/> No | Fair Trade Certified: | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

If yes, please attach a copy of your M/WBE or Fair Trade certificate to your GMDC Membership Application.

| Product Description |
|---|
| Description of Products and Services (Limited to 1000 CHARACTERS): |
| |

| Contact | | |
|---|--------|--------|
| Senior Marketing/Sales Executive (Primary GMDC Contact) | | |
| Full Name: | | Title: |
| Personal Phone/Ext: | | Email: |
| For the completion of the company information required for the GMDC Directory, who should we contact? <input type="checkbox"/> Same as above | | |
| Name: | Email: | Phone: |
| | | |

Product Liability

As part of the approval process GMDC requires that you provide a copy of your Product Liability Insurance certificate. This copy must show the name of carrier, limits of coverage, claims made or occurrence coverage, policy number and current policy period. ***Not providing a copy of your PRODUCT LIABILITY can affect the approval of your membership and your attendance at a GMDC Marketing Conference.***

Referrals

How Did You Hear About GMDC?

| | |
|----------------------------------|--|
| Someone Who Is a Member of GMDC: | |
| Other Trade Events: | |
| Other: | |