

# ASSOCIATE MEMBERSHIP APPLICATION

Please complete this form and return by fax to (703) 841-1184. Please include a short (50 word) company description that will be used in your member profile.

## COMPANY INFORMATION\*

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Main Fax: \_\_\_\_\_ Company Web site: \_\_\_\_\_

*\*This should be the main company headquarters information.*

## CONTACT INFORMATION

Primary Company Contact Name\*: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Dues Contact Name\*: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

*\*The primary company contact will receive all RILA correspondence and information to pass on to relevant individuals within the company. (We will also send RILA materials directly to other executives based on their job functions and interests.) The dues contact is the individual who should receive invoices for dues payment.*

## ASSOCIATE MEMBERSHIP DUES INFORMATION

Dues are determined based on annual revenue. Please refer to the rate schedule below to establish your applicable payment and provide verification with an annual report.

### Please circle annual revenue

Annual Revenue	Annual Dues
Less than \$199 million	\$2,500
\$200 - 499 million	\$3,500
\$500 - 999 million	\$5,000
\$1 - 10 billion	\$10,000
\$10 billion and above	\$15,000

For those associate member companies interested in having the opportunity to participate in the strategy and public policy direction of the association, the Board of Directors has established the Premier level of membership.

Premier Members pay flat dues of \$125,000 a year. This membership tier is extended as an invitation of the Board of Directors Nominating Committee. Companies may express their interest to Suzie Squier, senior vice president of marketing and membership, at [suzie.squier@rila.org](mailto:suzie.squier@rila.org) in order to provide information to the Nominating Committee.

*Dues payments to trade associations, such as RILA, are generally deductible as an ordinary business expense for federal income tax purposes. However, under the Omnibus Budget Reconciliation Act of 1993, such income tax deduction is denied for the portion of your dues attributable to expenses incurred for the purpose of lobbying or intervening in an election. RILA estimates that 65% of your dues will be attributable to lobbying expenses. Therefore, 65% of these dues are non-deductible for federal income tax purposes.*

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## BUSINESS INFORMATION

Individual company information will be held in strict confidence. RILA uses this information to cumulatively tally the size and scope of our membership.

**Does RILA have your permission** to use your company logo on our website in order to recognize your membership in RILA? If yes and your logo is not available on your company website, please send the logo in JPEG and EPS formats to [monica.dimuzio@rila.org](mailto:monica.dimuzio@rila.org).

- Yes, I am sending the logo via email in JPEG and EPS formats.
  No, you do not have permission to use our logo.
  Yes, please contact: \_\_\_\_\_ for our logo.

	(name)	(title)	(email)
Our company is ( <i>check one</i> ):	Our company provides the following services to retail companies:		
<input type="checkbox"/> Public	<input type="checkbox"/> Accounting Services	<input type="checkbox"/> Human Resources Services	<input type="checkbox"/> Consulting Services
<input type="checkbox"/> Private	<input type="checkbox"/> Distribution Services	<input type="checkbox"/> IT Services	<input type="checkbox"/> Loss Prevention Services
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Transportation Services	<input type="checkbox"/> Supply Chain Services	<input type="checkbox"/> Safety Products or Services

## MEMBERSHIP PAYMENT

### Checks:

Please submit checks payable to "Retail Industry Leaders Association" (indicate in memo section: MEMB) to:  
Retail Industry Leaders Association • P.O. Box 418421 • Boston, MA 02241-8421

### Credit Card:

Please charge my:  VISA     MasterCard     AMEX    TOTAL: \$ \_\_\_\_\_

Card #: \_\_\_\_\_ Exp.Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Please remit this information to: Retail Industry Leaders Association • P.O. Box 418421 • Boston, MA 02241-8421  
Or by fax to: 703-841-1184

I hereby certify that all the information contained on this application is complete and correct to the best of my knowledge.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_