



Associate Membership Application

This application determines your company's qualifications for membership in accordance with FPPA bylaws. Associate membership in FPPA is open to any firm or corporation that supplies products and services to flexographic pre-press platemakers, but does not engage in platemaking activities. Associate members are non-voting and may participate in programs and activities as determined by the Board of Directors. The entire application must be completed to be considered.

Date: _____

Company: _____

(Please spell the way you would like it included in all FPPA programs, publications, etc.)

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Website: _____

FPPA Representative 1: _____

Title: _____

Email: _____ Phone: _____

FPPA Representative 2: _____

Title: _____

Email: _____ Phone: _____

Additional company representatives may be registered for \$200 each.

Additional Locations

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Company Profile

Provide a brief description of your company.

Year established: _____

Number of years in the flexo pre-press industry: _____

Number of employees: _____

How you heard about FPPA: _____

Reasons for seeking FPPA Membership: _____

Other trade association memberships or affiliations: _____

Associate Member Dues

Check made payable to FPPA is enclosed for the annual dues of \$3,500.

Please charge my credit card \$3,500.

Visa MasterCard American Express

Card Number: _____ Exp. Date: _____ CSV: _____

Cardholder Name: _____

Address: _____

Cardholder Signature: _____

Membership Agreement

The undersigned represents that the information is accurate and complete, and will furnish additional information upon request. The undersigned agrees to abide by all present and future bylaws of the association, as well as rules and regulations as may be established by the Board of Directors. Additionally, the undersigned agrees to cooperate with fellow members and to work for the best interests of the association.

If membership is terminated for any reason after acceptance into the association, the undersigned agrees to discontinue all use of the association name, emblem, and any other reference that would imply any connection with the association in the conduct of business.

Company Name: _____ Date: _____

Name: _____

Title: _____

Signature: _____