

Any person, firm or corporation engaged in the manufacturing or distribution of wallcoverings sold in North America is eligible to apply for membership in the association. This also includes those persons, firms, and corporations engaged in supplying goods and services to the manufacturing and/or distribution segments of the industry. Election of any applicant to membership shall be by majority vote of the Board of Directors.

Please fill out the following information:

Name / Primary Contact _____

Title _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ Website _____

Please attach any additional company contacts or branch information on a separate sheet.

Check the membership and annual dues category below. Please note that the prices indicated below are for companies who are new members to the Wallcoverings Association or have not renewed in the last 2 years.

- | | |
|--|---|
| <input type="checkbox"/> Wallcoverings Manufacturer \$2,950 | <input type="checkbox"/> Wallcoverings Converter \$2,950 |
| <input type="checkbox"/> Wallcoverings Distributor \$2,950
(Company covering a territory of 4 or more states/provinces) | <input type="checkbox"/> Associate / Supplier \$2,950 |
| <input type="checkbox"/> Wallcoverings Distributor \$2,950
(Companies covering a territory of 3 or less states/provinces) | <input type="checkbox"/> Designer \$1,000 |
| <input type="checkbox"/> Specialty Manufacturer \$1,000
(5 employees or less; digital, hand-painted, etc) | <input type="checkbox"/> Specialty Manufacturer \$2,950
(6-10 employees; digital, hand-painted, etc) |
| <input type="checkbox"/> Sales Representative / Showroom / Independent Retailer \$1,000 | |
| <input type="checkbox"/> Major Retailer \$1,950 | |

Please estimate the percentage of business your company provides in each category:

Residential	%	Commercial	%
-------------	---	------------	---

Referral: Name/Company _____

- By check, send to:** Wallcoverings Association
 330 N. Wabash Ave., Suite 2000, Chicago, IL 60611
- By credit card, fax payments to:** 312-673-6928
- VISA Master Card AMEX

Credit Card # _____ Expiration Date _____

Card Holder (print) _____ Signature _____

Dues must be paid in full to activate membership. Dues are paid annually. Contributions or gifts to the WA are not deductible as charitable contributions for Federal income tax purposes but may be deductible as an ordinary and necessary business expense.