



ASSOCIATE MEMBERSHIP APPLICATION FORM

www.plasticsindustry.org

COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE

WEBSITE ADDRESS

PHONE

FAX

Step 1: Calculate your membership dues

$$\text{Annual Net Sales} / 1,000 = \text{Rate Per Thousand} \times \text{Rate Per Thousand} = \$ \text{Annual Dues (rounded to nearest dollar)}$$

Annual Sales

Less than \$1,456,304 **MINIMUM DUES = \$1,200**

\$1,456,305 \$20,054,605

Over \$20,054,606 **MAXIMUM DUES = \$16,525**

Rate Per Thousand

.824

Example Calculation:

$$\frac{\$5,000,000}{1,000} = \$5,000 \times .824 = \$4,120.00$$

Annual Sales / 1,000 = Rate Per Thousand x Rate Per Thousand = Annual Dues

Definitions for Reporting Net Dollar Sales

Purchasers of Plastics Products – Net total dollar value of the plastics portion of the products or components purchased for sale to customers within the U.S. and Puerto Rico.

Distributors or Sales Agents - Net total dollar sales to customers within the U.S. and Puerto Rico of the materials, adjuvants, or processing equipment (including tools and molds) utilized by processors in the production of plastics products.

Industrial Service Providers (transportation companies, contract packagers, warehouses, etc.)– Net total dollar sales to customers within the U.S. and Puerto Rico of services provided to processors/product manufacturers, resin & materials suppliers, machinery & equipment manufacturers and/or moldmakers.

Foreign-Based Manufacturers (No U.S. Sales) – Net total dollar sales of plastics materials and/or products less the cost of resin and glass.

Step 2: Payment Information: Select your form of payment, sign, date and then complete step 3.

Check – made payable to: The Society of the Plastics Industry, Inc. – P.O. Box 17031 – Baltimore, MD 21298-9503

Credit Card # _____

EXP. DATE ____/____



PRIMARY MEMBERSHIP CONTACT NAME (REQUIRED)

PRIMARY MEMBERSHIP CONTACT SIGNATURE (REQUIRED)

PRINT TITLE HERE

PHONE (if different from above)

FAX (if different from above)

E-MAIL

DATE ____/____/____

Step 3: Terms & Conditions

As a member of SPI all of your representatives will receive meeting notices, agendas, and minutes of relevant SPI committees and Industry Groups, as well as information on events, programs, products and services available from SPI, its Industry Groups and carefully selected partners, via e-mail, direct mail, and/or facsimile at the fax number you provide on this form or any other number provided to us in the future. **Your signature grants us consent to provide all of your representatives with this information in any media.** If, for any reason, you or your colleagues would not like to receive information in a particular media, please contact the SPI Membership Department at 202.974.5212 or e-mail spimembership@plasticsindustry.org, so that you will be removed from such lists.

PRIMARY MEMBERSHIP CONTACT SIGNATURE (REQUIRED)

This application form is used solely for calculation of SPI membership dues. All information requested here will be handled in the strictest confidence and independently audited from time to time. Dues and contributions to SPI are not deductible as charitable contributions. Further information should be obtained from your tax advisor.

Date Received:

Paid Invoiced