

MEMBERSHIP APPLICATION

UMAPP is a professional organization open to companies engaged in the promotional products industry. **One company membership covers all staff.**



Contact Information

Company Name: _____ Line Name (Suppliers): _____

Line Description (Suppliers): _____ Website: _____

PPAI Number _____ UPIC (optional): _____ ASI: _____ SAGE: _____

____ Check here if no ASI, PPAI, or SAGE number and see membership requirements below.

Billing and Mailing Address: _____

City: _____ State: _____ Zip: _____

Primary Contact Person for Membership Mailings/Invoices: _____

Phone: _____ Fax: _____ Email: _____

Were you referred to UMAPP? Name _____ Company _____

Membership Requirements and Categories

Membership Categories (check one):

____ Distributor Member. A company whose primary business includes developing ideas for the use of promotional products, buying such products from suppliers (manufacturers) and reselling them to end-buyers.

- ____ 1-3 employees (\$125)
- ____ 4-10 employees (\$150)
- ____ 11+ employees (\$175)

____ Supplier. \$125 p/year. A supplier is a company that manufactures, converts, warehouses, or decorates promotional products for sale to promotional products distributors or to a firm maintaining a division or affiliate devoted to reselling promotional products.

____ Business Services Member. \$125 per year. Company that is not in the promotional products industry, but sells services (such as fulfillment) to both suppliers and distributors.

____ Multi Line Rep. \$55 per year. An independent company, contracted by one or more suppliers to market their products and services to distributors. Membership is not required to exhibit at shows, but is required to utilize other UMAPP member benefits.

If no ASI, PPAI, or SAGE number:

- Suppliers: Submit 5 purchase orders from 5 different industry distributor companies.
- Distributors: Submit 5 invoices from 5 different industry supplier companies.
- Business Services: Must have been selling services to this industry for at least one year. Please submit either 5 invoices or purchase orders, or in the alternative, 5 written references from industry suppliers or distributors.

Dues and Payment

Membership term in UMAPP is from January – December. Dues are prorated beginning in February. Divide your dues amount by the number of months left in the year if joining between February – October. Members joining in November and December will enjoy a membership period through December of the following year.

Payment Options:

____ Check (made payable to UMAPP) ____ Pay online at www.umapp.org (bottom of home page) ____ Pay below

Name on card: _____ Billing address for card: _____

City: _____ State: _____ Zip: _____ Card No: _____ / _____ / _____ / _____ exp: ____ / ____

3 or 4 digit security # _____ Amount to charge to card: \$ _____ Email address for receipt: _____

Return to: UMAPP, 9292 Dartford Rd., Woodbury, MN 55125, Phone: 651-734-9767/Fax: 651-734-9110/umapp.sue@comcast.net

Dues, contributions, or gifts to UMAPP are not deductible as charitable contributions for federal income tax purposes, but may be deductible as a business expense.