



# PET INDUSTRY DISTRIBUTORS ASSOCIATION

## ASSOCIATE MEMBERSHIP APPLICATION

Application is hereby made by the undersigned for admission to Associate Membership in the Pet Industry Distributors Association. Dues for Associate Membership are \$400.00 year per company. Your dues are deductible as an ordinary and necessary business expense, and are not deductible as a charitable contribution. All applications must be accompanied by a check made payable to the Pet Industry Distributors Association (PIDA) for first year membership dues. FAILURE TO COMPLETE ALL INFORMATION MAY RESULT IN THE IMMEDIATE REJECTION OF YOUR APPLICATION.

(Please type or print)

Firm Name: \_\_\_\_\_

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

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

Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_ FAX: (     ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

**Associate Membership Qualifications:** Any person or entity who/that is a member of the pet industry trade press or who/that sells non-pet products or services (e.g., technology, insurance) to pet industry wholesaler distributors or retailers shall be eligible for Associate Membership. Persons and entities that merely supply raw materials or packaging products to manufacturers of pet products are not eligible for Association Membership. The Board of Directors (or its delegates) shall have discretion to determine whether an applicant shall be admitted as an Associate Member.

A. Number of years in the pet industry: \_\_\_\_\_

B. Describe your business operations: \_\_\_\_\_

C. Our annual pet industry sales volume is \$ \_\_\_\_\_

D. Number of full-time employees: \_\_\_\_\_

E. Please send any non-confidential sales promotional material on your product(s) or services and a copy of your printed letterhead.

The information presented in the Application for Associate Membership accurately represents my company. I hereby acknowledge failure to complete all sections of this Application may result in the immediate rejection of my Membership Application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PET INDUSTRY DISTRIBUTORS ASSOCIATION**

3465 Box Hill Corporate Center Drive, Suite H • Abingdon, MD 21009 • 443-640-1060 • Email: [pida@kingmgmt.org](mailto:pida@kingmgmt.org)

# Pet Industry Distributors Association

## **Associate** Membership Application

Your dues are deductible as an ordinary and necessary business expense, and are not deductible as a charitable contribution. PIDA estimates that 7% of your dues are not deductible because of PIDA's lobbying activities on behalf of its members.  
Our tax ID is: 36-2665370

**Please return this form along with your check payable to PIDA, 3465 Box Hill Corporate Center Drive, Suite H, Abingdon, MD 21009 or email to Nina Bull at [nbull@msp-amc.com](mailto:nbull@msp-amc.com).**

To pay by credit card (Visa, MasterCard, Amex), complete the following:

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_ CVC: \_\_\_\_\_

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

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

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