



**Please accept our application for Associate Membership in the American Frozen Food Institute (AFFI).** Any individual, partnership, firm, association or corporation actively and regularly engaged in the business of supplying packages, machinery, materials or services used in the production of frozen foods, and that is a supplier in good standing in the industry, or who is engaged in the marketing of frozen foods and is not eligible for membership as a processor or international processor, is eligible to become an Associate member of the Institute (AFFI Bylaws Article III, Section 3).

**Please type or print clearly**

Full Name of Company: \_\_\_\_\_

Name of Key Contact: \_\_\_\_\_

Key Contact's Title: \_\_\_\_\_

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

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

Postal Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Website: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant is actively and regularly engaged in the United States or a U.S. territory in the following business activities (check all that apply):  
 Packaging  Machinery  
 Materials  Services  Other  Distributing and/or marketing frozen food  
 Preservation of food by freezing and marketing frozen foods solely through applicant's own retail facility(ies)

Please Describe Business: \_\_\_\_\_

**Please Select Dues Level (Based on Gross Annual Revenues)**

Less than \$10 million (dues: \$2,000)

Between \$10 million and \$50 million (dues: \$2,500)

Between \$50 million and \$100 million (dues: \$3,000)

More than \$100 million (dues: \$3,500)

Application Completed By: \_\_\_\_\_

(Signature)

(Date)

(Please Type or Print Clearly)

(Date)

Referred By: \_\_\_\_\_

Upon approval of this application, AFFI will invoice your company for the dues level indicated