

NATIONAL ICE CREAM MIX ASSOCIATION

Active Membership Application



Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Website: _____

Company Products and/or Services: _____

Referred by: _____

Company Representative: _____

Title: _____

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

Business Telephone: _____ Home Telephone: _____

Email: _____

Signature: _____ Date: _____

Dues Schedule

<u>Net Annual Mix Sales</u>	<u>Annual Dues</u>
Less than 200,000 gallons/year	\$1,050
Between 200,000 and 500,000 gallons/year	\$1,200
Over 500,000 gallons/year	\$1,350

Please enclose a check made payable to the National Ice Cream Mix Association for annual membership dues along with this application and send to the address below.

NATIONAL ICE CREAM MIX ASSOCIATION

2107 Wilson Blvd., Suite 600, Arlington, VA 22201
Phone: 703 243 6111 Email: achilds@nmpf.org

Jamie Jonker, Executive Director
Ashley Childs, Program Administrator