



# DISTRIBUTOR MEMBERSHIP APPLICATION

(Type or Print)

PLEASE COPY THIS FORM AND GIVE TO DOWNLINE & FRIENDS

Name \_\_\_\_\_

Company(s) affiliated with: \_\_\_\_\_

Home Address \_\_\_\_\_

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

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Email \_\_\_\_\_ Web Site \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_

**Your membership entitles you to 1 vote - As a Member, you may be elected or appointed or request to have your name submitted to sit on a Council immediately and/ or the Board of Directors after one year.**

I hereby apply for membership in Multi-Level Marketing International Association (MLMIA), "The Association for Network Marketing, Worldwide." I understand that to be accepted for active membership I agree that I (a) will operate in a professional manner with high moral standards (b) will subscribe to and uphold the principles and ethics prescribed by the Association (Code of Ethics) and (c) will continually strive to meet all requirements and standards established by the Association. I understand that to remain a Member in good standing my membership must be renewed annually.

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

Annual Individual Dues **Total \$ 60.00 -**

2 people at same address **\$ 90.00**

Annual Individual Dues Outside of U.S.: **Total \$ 60.00**

2 people at same address **\$ 90.00**

**Please make payable to MLMIA in US funds only:** Amount \$ \_\_\_\_\_

**METHOD OF PAYMENT: Please (X) one**

Check/Money Order  MasterCard  Visa  Am. Exp.

Print name as it appears on card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

OFFICE USE US \_\_\_ A \_\_\_ E \_\_\_ CA \_\_\_ RT \_\_\_

**63002**