



9707 Key West Avenue, Suite 100
 Rockville, MD 20850
 Phone: (301) 740-1421 * Fax: (301) 990-9771

APPLICATION FOR MEMBERSHIP

Company Name: _____

Company President: _____

Company Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

Website: _____ E-Mail: _____

Number of Employees: _____ SIC Code: _____

Primary Point of Contact (if different from above): _____

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Telephone: _____ Fax: _____ E-Mail: _____

Preferred method of communication:
 following
 (check all that apply)

Company personnel have expressed an interest in serving on the
 Committee(s):

- Email
- Fax
- Mail
- Phone

- Certification
- Convention
- Education
- Legislative

- Marketing
- Membership
- Technical
- Boiler

- Cooling
- Pretreatment
- Special Projects
- Waste Water

Should you wish to list additional personnel, please provide their information on a separate sheet and attach it to this application. Please indicate if you would like the personnel to receive AWT updates and/or be listed in the online membership directory, as well as the preferred method of communication.

Please submit a brief written statement of your company's mission and services along with this application. This will assist the Membership Committee and Board of Directors with the review of your application and ensure that you are in the appropriate membership category. You may be asked to provide additional information during your probationary status.

MEMBERSHIP CATEGORIES

Please check the category that best applies to your company and enclose the appropriate dues payment (in U.S. dollars). The following dues amounts are for membership from **January through December**.

Full Member: **\$510**

Water Treatment companies whose primary business is sales and service of water treatment chemicals and equipment to end-users. This category of membership is available exclusively to companies (or subsidiaries, or divisions) having less than 250 employees and less than \$30 million in annual gross revenues.

Combined Full Member: **\$675**

Water Treatment companies whose primary business is to sell and service water treatment chemicals and equipment to end users, but also sell to and provide services to other water treatment companies (Full Members). This category of membership is available exclusively to companies (or subsidiaries, or divisions) having less than 250 employees and less than \$30 million in annual gross revenues.

Associate Member: **\$775**

Companies that manufacture products and/or sell services to Water Treatment companies - suppliers of Full Members.

Consultant Member: **\$510**

Companies or Individuals who advise Full Members and/or end users regarding the use of water treatment chemicals and equipment. This category of membership is available exclusively to professional consulting firms having annual sales of less than \$30 million.

Manufacturer's Representative Member: **\$510**

Distributors (non-manufacturers) of products sold to independent water treatment companies (i.e., Full Members). Manufacturer's representative members must represent products for at least one Associate Member of AWT and have annual sales of less than \$30 million.

Please refer to the AWT bylaws for the proper definition of each category.

My Company hereby applies to become a member of the Association of Water Technologies. I have indicated the category of membership that I believe best suits my company profile. I understand that payment is due, in full, with my application. In the event that I have selected the incorrect membership category, AWT reserves the right to place me in the category that they deem appropriate for my company. I fully understand and accept that, should my membership category change due to company size or assets, I will notify AWT and make the applicable changes.

Signature: _____ Date: _____

AWT Member who introduced you to AWT (optional): _____

PAYMENT INFORMATION

(1) Company check enclosed for \$ _____ (Make Check Payable to AWT) Check # _____

OR

(2) Please charge \$ _____ to my Visa Master Card American Express

Account Number: _____ Expiration Date: _____

Name as it appears on card: _____

Signature: _____

The IRS has determined that dues are non-deductible as a business expense to the extent that they support lobbying activities. The AWT budget projects less than 1% of dues revenue to be spent on lobbying and therefore non-deductible.

Please contact Angela Pike, Member Services Manager, at (240) 404-6477 or apike@awt.org with questions.