

Employee Name

2023 NEW MEMBER APPLICATION PULVERIZED MINERALS DIVISION

INFORMATION PROVIDED WILL BE KEPT CONFIDENTIAL

By signing this form, you hereby certify that everything stated on this form is correct and complete to the best of your knowledge.

ted materials)							
	City			State	Zip		
Phone			Fax				
Title			Signature				
Email		Date					
MEMBERSHIP ELIGIBILITY	DUES PAYMENT (Jan. 1 - Dec. 31, 2023)						
Individual proprietor, firm or corporation that manufactures finely ground (minus 100 mesh) limestone and other industrial minerals. If you are already an NSSGA Producer member that produces PMD's and pay \$5,000 or more in dues, we will waive the PMD fee.		\$5,000 \$1,650* TOTAL ANNUAL DUES					
ng more than \$5,000 in	Check	AmEx	MasterC	ard	Visa		
	Card Number				Expiration Date		
	Card Holder Na						
	Card Holder Si	gnature			Signature Date		
				Billing Co	ontact Email		
Please attach copies of your product MSDS's.		* Rate reflects a 67% discount for first-year membership; second year will be billed at \$3,350, which reflects a 33% discount. In year three, your annual dues will be billed at the normal rate effective at that time.					
			Membership dues include an online subscription to the <i>Stone, Sand & Gravel REVIEW.</i>				
				NOTE: For federal tax purposes, a portion of your dues payment to NSSGA may be deductible as an ordinary and necessary business expense. To complewith the 1993 Budget Reconciliation Act, the percentage of NSSGA funds expended for lobbying activities, 20% of your dues, are not deductible.			
OCKPAC SOLICITA	TION (requi	ired by the	Federal Ele	ections Co	ommittee)		
ns by more than one trade as							
	person below	for a list o	f individual	s to solic	it for contributions to		
	Title Email Anufactures finely ground minerals. If you are oduces PMD's and pay D fee. Ing more than \$5,000 in OCKPAC SOLICITA Fior approval of NSSGA meminers by more than one trade as your consideration.	Title Email DUES PA Soluces PMD's and pay Difee. Ing more than \$5,000 in Check Card Number Card Holder Notes allied at \$3,35 dues will be bit Membership Gravel REVIEW NOTE: For fee may be deduct with the 1993 expended for it in solutions are proval of NSSGA members before solicities by more than one trade association for the report consideration. In to please contact the person below	Phone Title Email DUES PAYMENT S5,000 \$1,650* TOTAL ANNUAL DUES Check AmEx Card Number Card Holder Name (print) Card Holder Signature Membership dues include Gravel REVIEW. NOTE: For federal tax pumay be deductible as an owith the 1993 Budget Receive expended for lobbying actions by more than one trade association for the same calent your consideration. In to please contact the person below for a list of the same calent on the please contact the person below for a list of the same calent on the parson below for a list of the same calent on the person below for a list of the same calent on the person below for a list of the same calent of the person below for a list of the same calent of the same	Title Signature Email Date DUES PAYMENT (Jan. 1 - De anufactures finely ground minerals. If you are aduces PMD's and pay Difee. Ing more than \$5,000 in Check AmEx Master Company of the same forcement actions. Total Annual Dues Card Holder Name (print) Card Holder Signature Billing Contact Name * Rate reflects a 67% discount for first-billed at \$3,350, which reflects a 33% of dues will be billed at the normal rate ejent may be deductible as an ordinary and with the 1993 Budget Reconciliation Ac expended for lobbying activities, 20% of the same calendar year. If your consideration. DCKPAC SOLICITATION (required by the Federal Elector approval of NSSGA members before soliciting contributions from your spour consideration. On to please contact the person below for a list of individual	Phone Fax Title Signature Dute Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Payment (Jan. 1 - Dec. 31, 202 State State Dues Payment (Jan. 1 - Dec. 31, 202 State Dues Paym		

Email

FOR OFFICE USE ONLY Order ID: Date: Payment ID:

Phone