

## FULL MEMBERSHIP APPLICATION

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4891 Long Beach Rd., SE, Suite 3, Box #291 Southport, NC 28461 • Phone (301) 907-8181

CONTACT INFORMATION  Company Name				Year company established											
Primary Contact				Additional Contact											
Address City, State, Zip Phone Fax E-mail				E-mail Additional Contact E-mail Additional Contact E-mail E-mail											
								Website			<del></del>				
								DUES STRU					n gross sales for the previous year. Please have your accountant		
								FULL MEMBER Dues Annual Sales			sign the attached verification form and return it along with your dues payment.				
								□ \$1,500	\$0-250,000		* An estimated 6.2	5% of your du	es are non-deductible as a result of APA lobbying activity		
□ \$2,400	and the second														
<b>\$4,200</b>	\$750,001-3,000,00		☐ I have read a	nd agree to a	bide by the APA Code of Ethics.										
\$8,000	\$3,000,001-5,000,0			J	·										
□ \$10,500 □ \$12,000	\$5,000,001-10,000 \$10,000,001-15,00														
□ \$12,000 □ \$15,000	\$15,000,001-15,00 \$15,000,001 & Abo														
	FERENCES				Company Name / Name of Contact										
	ree APA member o				Company Name / Name of Contact										
	ss and can verify			1											
	If you cannot pro APA for assistance			t 🥠											
	erences from a fire														
that is curren	tly an APA member.			3											
NATURE	OF BUCINESS	(D) :													
NATURE	OF BUSINESS	(Please in	dicate the compa	ny's <u>primary</u>	nature of business)										
Please use th	ne followina definitio	ns when complet	ina this section	Wh	olesaler (Jobber) Sells fireworks to retailers for resale to										
Please use the following definitions when completing this section Manufacturer Manufactures fireworks or other pyrotechnic devices.				consumers.  Retailer Sells consumer fireworks to the public or fireworks											
								<b>Distributor</b> Sells fireworks to wholesalers (jobbers) and retailers for resale.				displays to users. (retail stands, tents, fireworks stores)  Display Firm Provides public displays, or sells fireworks			
retailers for resaile.				displays to customers.											
	cate the approxima		of your firework	s business	Please insert the approximate percentages of										
that falls into the following categories:					your purchases from the following supplier										
		Products Consumer			categories:										
		Fireworks	Fireworks	Other (specify)											
Manufacture	er			(-1	American Manufacturer%										
Distributor					Other Manufacturer%										
Wholesale					American Distributor%										
Retail					7 thorican Distributor										
Display															
PAYMENT	INFORMATION	N			□Check Enclosed □Credit Card: □ MC □ VISA □ AMEX										
Card Holders Name				L											
CC#					Total enclosed/to be charged \$										
Expiration Da	e:	Security Cod	de:	L											



Signature

## **MEMBERSHIP APPLICATION**

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Date

7910 Woodmont Ave., Suite 1220 

Bethesda, MD 20814 Phone (301) 907-8181

## FIREWORKS SALES VERIFICATION FORM

(Must be completed for all Applicants and Full Member Renewals)

	r Accountant to provide the following the American Pyrotechnics Associated without my express consent.		
Printed Name of Authorizing Indiv	idual		
Signature	Title	Date	
ACCOUNTANT CERTIFICA	TION		
	e gross annual sales of fireworks for		nbership named above, should fall into the any subsidiary companies engaged in the
	Annual Fireworks Sales (Including fireworks, toy smoke devices, sparklers and trick noise makers.)	Preparer's Initials	
	\$0 - \$250,000		
	\$250,001 - \$750,000		
	\$750,001 - \$3,000,000		
	\$3,000,001 - \$5,000,000		
	\$5,000,001 - \$10,000,000		
	Above \$10,000,000		
Printed Name			
Name of Firm			

Title