



International Franchise Association SUPPLIER FORUM MEMBERSHIP APPLICATION

Please return to:
IFA Membership Department
1900 K St. NW, Suite 700
Washington, D.C. 20006

Phone: (202) 628-8000

Fax: (202) 628-0812

Email: membership@franchise.org

Website: www.franchise.org

ORGANIZATION INFORMATION

Company Name _____
Address _____
City _____ State _____ Zip _____ Country _____
Telephone _____ Fax _____
Email _____ Web Address _____

PERSONNEL INFORMATION

Primary Contact Person _____ Title _____

Additional contacts from your company who would like to receive Supplier Forum mailings:

Name _____ Title _____ Email _____
Name _____ Title _____ Email _____
Name _____ Title _____ Email _____

OPERATIONS INFORMATION

Type of Business _____ In Business Since _____

LITIGATION HISTORY

Has your company, or any officer, director or other company official been:

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Convicted of a felony, or been held liable in a civil action by final judgment in such felony or civil action involved fraud, embezzlement, fraudulent conversion or misappropriation of property? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Subject to any order of the Securities and Exchange Commission or the securities administrator of any state denying, revoking or suspending the registration or sale of any securities? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Subject to any order or ruling of the Federal Trade Commission or state regulatory agency, or subject to any order or ruling which places conditions or restrictions on the registration or sales of franchises or distributorships? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Subject to an injunctive or restrictive order relating to business activity as a result of any action brought by any public agency or department? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered "yes" to any of the above questions, please attach specific information as to nature and disposition.

CERTIFICATION

In making application I hereby certify by a duly authorized signature that the information submitted is current, accurate and complete to my best knowledge and belief and that I have read and understand the Supplier Forum Code of Ethics and the business of the applicant is conducted in accordance with the Code. I understand that membership in the IFA is conditional upon adherence to the Code and membership may be either suspended or terminated by the IFA Board of Directors for failure to comply with the Code, or for false statement or representation made in this application or in the attachments.

Signature _____
Printed Name _____
Date _____

Dues payments to the IFA are not deductible as charitable contributions for U.S. Federal Income Tax purposes. Dues may be deductible as an ordinary business expense, subject to restrictions pertaining to lobbying activities. IFA estimates that the non-deductible portion of your payment due to lobbying is 18%. \$18 of your dues is allocated for each subscription to Franchising World magazine you receive as part of membership and may not be used to reduce annual dues.

Annual Dues Payment of \$3,860

- Check payable to IFA (Federal Tax ID # 36-6108621)
- Wire Transfer: Contact IFA for information
- Credit Card: AMEX VISA MasterCard Discover

Card Number _____
Expiration Date _____
Cardholder's Name _____ Signature _____
Cardholder's Billing Address _____

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