

## CORPORATE MEMBERSHIP APPLICATION

(Please Type or Print)

Company Name		
President/CEO		
Address		
City	State	Zip
Phone ( )	Fax (	)
Fax On Demand ( )	email	Web Site
Mailing Address (If different from above)		
Your company is entitled to 2 additional officer/staff representatives - Company representatives may vote/hold office.		
Representative	Title	
Representative	Title	
CORPORATE MEMBERSHIP DUES		
\$1,000 lst Year Operation -Under 1,00	00 Distributors	\$2,500 1001 to 5000 Distributors
\$4,000 5,001 to 10,000 Distributors		\$5,000 10,001 to 25,000 Distributors
\$7,500 25,001 to 50,000 Distributors		\$10,000 over 50,000 Distributors
Check - payable to MLMIA Mail to → 119 Stanford Court – Irvine, CA 92612		
Visa MasterCard AmEx $Fax \rightarrow (949) 854 7687$		
Credit Card Number	Expiration Date	
Print name on credit card	dit card Signature	
We hereby apply for membership in Multi-Level Marketing International Association (MLMIA). We understand that to be accepted for active membership we agree that we: (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. (c) Will continually strive to meet all requirements and standards established by the Association. We understand that to remain a member in good standing our membership must be renewed annually.  Signature  Date		
OFFICE USE EX QB N	MS DJ ECD_	