



# Membership Application 2017

|                      |              |            |
|----------------------|--------------|------------|
| <b>Company Name:</b> |              |            |
| <b>First Name:</b>   |              |            |
| <b>Last Name:</b>    |              |            |
| <b>Job Title:</b>    |              |            |
| <b>Address:</b>      |              |            |
| <b>City:</b>         | <b>State</b> | <b>Zip</b> |
| <b>Country:</b>      |              |            |
| <b>E-mail:</b>       |              |            |
| <b>Website:</b>      |              |            |
| <b>Telephone:</b>    |              |            |
| <b>Fax:</b>          |              |            |
| <b>Signature:</b>    | <b>Date</b>  |            |

I hereby make application for membership in the Tortilla Industry Association and agree to abide by its bylaws and support its objectives and interests and to pay such dues as may be established for membership.

**Select one or all that apply to your business:**

- Producer -Tortillas, Chips or Flatbreads**
- Supplier – Manufacturing Equipment**
- Supplier – Packaging Equipment**
- Supplier - Ingredients**
- Other Supplier:** \_\_\_\_\_

## MEMBERSHIP CATEGORIES & ANNUAL DUES SCHEDULE – PLEASE CIRCLE ONE ↓

| CATEGORY             | DESCRIPTION  | PRICE   |
|----------------------|--|---------|
| <b>REGULAR</b>       | Producer of Tortillas, Chips, or Flatbreads, Sales to \$1 Million / Yr     | \$275   |
| <b>REGULAR I</b>     | Producer of Tortillas, Chips, or Flatbreads, Sales to \$2.5 Million / Yr   | \$550   |
| <b>REGULAR II</b>    | Producer of Tortillas, Chips, or Flatbreads, Sales \$2.5 - \$5 Million Yr  | \$1,250 |
| <b>REGULAR III</b>   | Producer of Tortillas, Chips or Flatbreads, Sales over \$5 Million Yr      | \$2,250 |
| <b>AFFILIATE</b>     | Suppliers / Vendors to the industry  | \$2,500 |
| <b>INTERNATIONAL</b> | Producer or Supplier based outside of the USA                              | \$275   |
| <b>IN STORE</b>      | Bakery Inside grocery store or supermarket                                 | \$300   |
| <b>ASSOCIATE</b>     | Other involved groups: non-profits, universities, media, restaurants, etc. | \$500   |

### PAYMENT:

- By Check – Mail to: TIA, 1400 14th Street North, Arlington VA 22209
- By Credit Card: - Fax to: 1-800-944-6177 <or>
- Scan & E-Mail to: [jkabbani@tortilla-info.com](mailto:jkabbani@tortilla-info.com)

|                         |             |           |             |
|-------------------------|-------------|-----------|-------------|
| <b>Credit Card Type</b> | <b>VISA</b> | <b>MC</b> | <b>AMEX</b> |
| Name on Card:           |             |           |             |
| Card Number:            |             |           |             |
| Expiration Day:         |             |           |             |
| Signature:              |             |           |             |