



CORPORATE MEMBERSHIP APPLICATION

(For any company that sells products or services through Independent Contractors)

Please Type or Print

Company Name _____

President/CEO _____

Address _____

City _____ State _____ Zip _____ Country _____

Phone () _____ Fax () _____

email _____ Web Site _____

Mailing Address (If different from above) _____

Corporate Members are entitled to 2 additional representatives - Company representatives may vote/hold office.

Representative _____ Title _____

Representative _____ Title _____

WE WERE REFERRED TO MLMIA BY: _____

CORPORATE MEMBERSHIP DUES - In US Funds

Please check the appropriate box as to number of Distributors:

- | | |
|---|---|
| <input type="checkbox"/> \$1,200. --- Under 1,200 Distributors | <input type="checkbox"/> \$2,400. --- 1201 to 5000 Distributors |
| <input type="checkbox"/> \$4,200. --- 5,001 to 10,000 Distributors | <input type="checkbox"/> \$6,000. --- 10,001 to 15,000 Distributors |
| <input type="checkbox"/> \$7,200. --- 15,001 to 25,000 Distributors | <input type="checkbox"/> \$12,000. --- Over 25,000 Distributors |

Dues in excess of \$2500 can be made in 2/3 equal or larger installments 60 days apart.

Please check the appropriate box as to method of payment:

- | | |
|---|--|
| <input type="checkbox"/> Check - payable to MLMIA | <input type="checkbox"/> Mail to ® 119 Stanford Court – Irvine, CA 92612, USA |
| <input type="checkbox"/> Visa | <input type="checkbox"/> Master Card |
| <input type="checkbox"/> AmEx | <input type="checkbox"/> Fax ® 1 (949) 854 7687 |

Credit Card Number _____ Expiration Date _____

Print name on credit 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 and we must complete the Verifiable Standards form that will be sent to us.

Signature

Date

OFFICE USE EX _____ QB _____ MS _____ DJ _____ ECD _____ **7004**