



SUPPLIER • MULTI-LINE REP • BUSINESS SERVICES

APPLICATION FOR MEMBERSHIP

Supplier: A company within the United States or its possessions, Canada or Mexico, that manufactures, imports, converts, imprints or otherwise produces or processes promotional products offered for sale through promotional products distributors.

Multi-line Representative: An independent company contracted by one or more suppliers to market their products and services to distributors.

Business Services: A company that offers services, information or products (other than promotional products) that support the normal conduct of business in the promotional products industry.

Company Name _____

Primary Contact Person _____

Phone _____ Mobile _____

Mailing Address _____

City _____ State _____ Zip Code _____

Email Address _____ Website _____

Date Established _____ PPAl# _____ SAGE# _____ ASI# _____

Your company will be listed in our online Membership Directory, accessible to NEPPA members only, based on the above information.

☐ Please indicate here any information that you DO NOT want included: _____

☐ Check here if you DO NOT want your company contact information to be listed in the Membership Directory.

☐ I would like other company personnel to receive NEPPA communications (news, announcements, etc.). Please provide their contact info below. (Attach a separate sheet if needed.)

Class of Membership You Are Requesting:

☐ **SUPPLIER:** If your company is not a member of PPAl, an affiliate of SAGE or ASI, you must supply 3 copies of invoices, \$75.00 minimum each – sample orders excluded, to 3 different promotional product distributors with whom you do business.

Product Description _____

☐ **MULTI-LINE REPRESENTATIVE:** Please list the lines you represent and include PPAl/SAGE/ASI numbers.

☐ **BUSINESS SERVICES:** Please provide copies of purchase orders for 3 different PPAl, SAGE or ASI distributors or suppliers for products or services sold during the last year. Description of products/services _____

I hereby apply for membership in the New England Promotional Products Association and agree to be governed by its bylaws and any other regulations that may be properly adopted by the Board of Directors. I authorize NEPPA to verify the above listed information.

Application Agreement: Applicant's Name _____

Remittance: To process membership, attach a check (payable to NEPPA) or complete credit card information. Dues may not be deducted as a charitable expense but may be deducted as a business expense according to the IRS.

Membership dues are paid on an annual basis (January 1 – December 31) and are not prorated.

☐ 1-Year Membership: \$185.00 Payment in U.S. Funds

☐ Payment by Check Check # _____

☐ Payment by Credit Card Complete the secure, online credit card payment form: <https://fs6.formsite.com/R2E2Gc/skgqtaekrs/index.html>

Submit completed application to:

Email: info@neppa.com

Mail: NEPPA, 4 Center St. #174, Wolfeboro, NH 03894

603-529-8400 (Phone)