

Supplier Membership Application



Definition per Article III, Section II of the AWI Bylaws: "A Supplier Member shall be a business that primarily supplies raw materials, products or services to architectural woodwork manufacturers."

MAILING INFORMATION:

Company Name				Date of Application
Physical Address	City	State	Postal code	Country
Mailing Address (if different)	City	State	Postal code	Country
Phone No.	Fax No.	Toll Free No.		
Company Email				Company Web Site

PRIMARY CONTACT:

Name of Company Principal	Title	Principal's E-mail
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Additional Company Contact: (for AWI mailings of interest)

Name of Additional Contact	Title	Contact's E-mail
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BUSINESS INFORMATION: Product Categories (Please check all that apply.)

<input type="checkbox"/> Abrasive Materials & Sanding Equipment <input type="checkbox"/> Computer Solutions & Software <input type="checkbox"/> Consulting, Financial & Management <input type="checkbox"/> Consulting, Plant & Operations <input type="checkbox"/> Consulting, Woodwork Projects <input type="checkbox"/> Doors, Flush Solid & Hollow <input type="checkbox"/> Doors, Labeled <input type="checkbox"/> Doors, Raised Panel, Stile & Rail <input type="checkbox"/> Education & Training Provider <input type="checkbox"/> Fabrics, Leather, Upholstery <input type="checkbox"/> Finishing Equipment & Materials <input type="checkbox"/> Finishing Services <input type="checkbox"/> Fire Rated Materials - Raw <input type="checkbox"/> Fire Rated Materials - Manufactured <input type="checkbox"/> Gluing, Laminating & Veneering <input type="checkbox"/> Hardware, Fasteners & Accessories <input type="checkbox"/> Laminates, Plastic & Metal <input type="checkbox"/> Lumber, Wood Parts, Moulding	<input type="checkbox"/> Machinery, Tooling, Equipment <input type="checkbox"/> Metals, Decorative <input type="checkbox"/> Panel Products, Veneers <input type="checkbox"/> Shop Drawing Services <input type="checkbox"/> Solid Surface Materials - Raw <input type="checkbox"/> Solid Surface - Fabricated Products <input type="checkbox"/> Stairs & Stair Parts <input type="checkbox"/> Unique Veneer Products <input type="checkbox"/> Veneers, Architectural <input type="checkbox"/> Woodwork Installation <input type="checkbox"/> Consulting, Woodwork Inspections <input type="checkbox"/> LEED Compliant Products <input type="checkbox"/> FSC Certified Veneer Products <input type="checkbox"/> FSC Certified Lumber Products <input type="checkbox"/> Other Certified Forest Products <input type="checkbox"/> Other: _____
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Total Employees in Your Company: _____ Total Square Footage: _____ Year Founded: _____

General Geographic Area of Sales, Service & Support _____

BUSINESS REFERENCES:

AWI's application process requires submission of either one AWI Manufacturing Member reference or one Architect, one General Contractor and one Financial Institution. Without these reference(s), AWI cannot start your application process. All information obtained will be held in strict confidence and applicant, by signing this membership application form grants the Architectural Woodwork Institute express permission to contact references provided and other sources.

Contact Name Company Email Phone

Contact Name Company Email Phone

SUPPLIER MEMBERSHIP CLASSIFICATIONS (please check one)

- ___ Gross Annual Sales over \$10,000,001 USD Category D Annual dues = \$1,100 USD
- ___ Gross Annual Sales between \$5,000,001 - \$10,000,000 USD Category E Annual dues = \$ 900 USD
- ___ Gross Annual Sales less than \$5,000,000 million USD Category F Annual dues = \$ 700 USD

APPLICATION PROCESSING:

After completing the above required information, please remit your first year's annual dues in full. All references and information herein may be verified. Any falsified information provided by the applicant may result in the forfeiture of dues or fees paid and expulsion from membership in the Architectural Woodwork Institute.

DUES PAYMENT:

All dues payments may be made either by company check or credit card.

CERTIFICATION OF APPLICATION:

I hereby certify and attest that the information submitted herein to the Architectural Woodwork Institute for application of membership is correct and accurate to the best of my knowledge.

Signature and Title of Applicant Date

PAYMENT INFORMATION:

- Total Amount Enclosed \$ _____
- ___ Company Check Attached
- ___ Credit Card Payment Option
(info can be found at right)

CREDIT CARD INFORMATION:

- VISA ___ American Express ___ MasterCard ___
- Credit Card Number: _____
- Exp. Date: _____ Security Code _____
- Print name as appears on card: _____
- Signature of Cardholder: _____

Are you currently affiliated with an AWI chapter ___ No ___ Yes, name of Chapter _____

If **NO**, would you like contact information for your nearest AWI Chapter? ___ Yes ___ No

Reason for Joining AWI? ___ Education/Publication ___ Industry Standards ___ Marketing/Professional Affiliation
___ Networking ___ Quality Certification Discount ___ Other

Apply online at www.awinet.org -OR-

Return application and payment to:

Architectural Woodwork Institute
46179 Westlake Dr., #120, Potomac Falls, VA 20165
PH: 571-323-3636 FX: 571-323-3630

Payments will not be processed until application is approved.

Once dues payment and application have been processed, AWI will not issue a refund.