

## Application for Membership

### Credit Group for the Accessory Manufacturers Division of the NMMA

*We hereby make application to the Credit Group for the Accessory Manufacturers Division of the NMMA and, if accepted, agree to abide by the Bylaws of the organization and pay invoices for services and meetings when rendered. We fully understand that the purpose of the organization is the mutual exchange of credit information and that the use of this information for any purpose other than credit or the disclosure of this information to any unauthorized person shall constitute a breach of trust and make us liable for suspension from this group.*

Legal Company Name:	Duns Number:
DBA or Trade Style:	Telephone Number:
Mailing Address:	800 Number:
Physical Address:	FAX Number:
E-mail Address:	Web Site:
Are you a member of the NMMA (National Marine Manufacturers Association)? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Are you a subsidiary, division or affiliate of a parent company? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Legal Name of Parent Company:	
Parent Company Address:	Parent Company Duns Number:
Name and title of main representative (will receive all mailings and attend meetings regularly):	
Name and title of any alternate representatives:	
There are three (3) meetings per year held throughout the U.S. You are required to attend a minimum of one within a 12-month period. How many will you or a designated alternate attend? _____	
Are you currently a member of any other credit associations? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, which one(s)? _____ _____	
How many people are on the Credit Staff? _____	Are you a: <input type="checkbox"/> Manufacturer <input type="checkbox"/> Distributor
What is your principal product line?	
What is your customer base?	
Number of years selling the industry: _____	Number of <u>active</u> accounts: _____
Average invoice amount: _____	What is your distribution channel? _____
Do you have end user sales (if a distributor)? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Do you sell nationally?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

Further information which might help evaluate your company for membership:

While the Association and its Member Corporations make every effort to be accurate and complete in the exchange of information, the Association and its Member Corporations make no representations or guarantees regarding the accuracy and/or completeness of the information exchanged among us. Furthermore, by making this application, we agree on behalf of our Corporation, its agents, servants, or employees, that the Credit Group for the Accessory Manufacturers Division of the NMMA and its Member Corporations shall not be liable for any loss or injury, in whole or in part, resulting from the acts, omissions or statements of the Association and/or its Member Corporations relating to credit matters.

It is also understood that falsification of any information provided herein will result in denial of membership and/or expulsion from the Association.

How did you learn of the credit group?

Application Submitted by:

Firm Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Recommended by:

Firm Name: \_\_\_\_\_

Member Name: \_\_\_\_\_