

- New Member       Renewing Member

### Company Information for Profile

### Primary Contact Information

Co. Name: \_\_\_\_\_

Address: \_\_\_\_\_ Name: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Co. Email: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Description: \_\_\_\_\_

**Identify your product(s) and service(s) then indicate classification on the line provided with the following:**

A=Association, D=Distributor, M=Manufacturer, OR=Organizer, OT=Other, P=Publisher, R=Retailer, and/or S=School (NAfME reserves the right to edit.)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Audio/Visual (AV) _____                        | <input type="checkbox"/> Music Publications (MP) _____   | <input type="checkbox"/> Recording Services (RS) _____                          |
| <input type="checkbox"/> Awards/Gift (AG) _____                         | <input type="checkbox"/> Music Support Equip. (MS) _____                                       | <input type="checkbox"/> School (SC) _____                                      |
| <input type="checkbox"/> Band/Orch. Instrum./<br>Accessories (BO) _____ | <input type="checkbox"/> Music Technology (see below)<br>_____ Teaching/Learning Hardware (TH) | <input type="checkbox"/> Textbook/Magazine/Pubs (TP) _____                      |
| <input type="checkbox"/> Classroom/Misc.<br>Instruments (CM) _____      | <input type="checkbox"/> _____ Teaching/Learning Software (TS)                                 | <input type="checkbox"/> Tour/Travel/Festival Services (TS) _____               |
| <input type="checkbox"/> Electronic Instruments (EM) _____              | <input type="checkbox"/> _____ Performance Hardware (PH)                                       | <input type="checkbox"/> Uniforms/Robes/Marching Band<br>Accessories (UA) _____ |
| <input type="checkbox"/> Fundraising (FR) _____                         | <input type="checkbox"/> _____ Performance Software (PS)                                       | <input type="checkbox"/> Other (OT) _____                                       |
|   | <input type="checkbox"/> Piano/Organ (PO) _____  | _____   |

### Payment Information

Membership Level (check one)     Bronze (\$350)     Silver (\$550)     Gold (\$1,000)

Check (Made payable to NAfME)     Visa     MasterCard     American Express     Discover

Name on Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

**For CHECK PAYMENTS, mail completed form and check to:**

NAfME  
PO Box 61  
Lewiston, ME 04243-0061

**For CREDIT CARD PAYMENTS, email completed form to:**

Corporate@nafme.org