



# Affiliate Membership Application - 2018-19

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date Founded: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

**Affiliate Members:** Any firm whose primary business is the wholesale distribution of animal health-related products to entities qualifying for Active membership under (a) above; who provides such wholesale distribution functions as maintaining and owning a diversified inventory of industry products, breaking of bulk shipments, providing shipping and receiving services, extending credit and providing sales and technical assistance for suppliers of animal health-related products; and who has done such for at least on (1) year in the North American Continent, the adjacent islands, or United States possessions, may, upon application, be granted Affiliate membership. Affiliate members shall have no vote or right of participation in business meetings of the Active Members, and shall not be eligible to serve as directors or officers of the Association.

Name of Person Who Will be Company's Key Member Representative to AVDA: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address if Different From Above: \_\_\_\_\_

Additional Representative (if any): \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address if Different From Above: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Signature of Person Submitting Application: \_\_\_\_\_ Date: \_\_\_\_\_

Amount of Dues Payment Enclosed: \$ \_\_\_\_\_

Please describe the products you manufacture: \_\_\_\_\_

Approximately how many Animal Health Distributors do you supply? \_\_\_\_\_

Please list 5 authorized distributors of your products in the United States: \_\_\_\_\_

How did you hear about AVDA? \_\_\_\_\_

Do you plan to send a representative to AVDA's Annual Conference (usually held in April/May)? \_\_\_\_\_

**Please return this application, together with a check for \$2,500** covering annual dues, to: American Veterinary Distributors Association, 3465 Box Hill Corporate Center Drive, Suite H, Abingdon, MD 21009.

*\* Your dues may be deductible as an ordinary and necessary business expense. Your dues are not deductible as a charitable contribution.*