



American Mold Builders Association Membership Qualifications and Dues Structure

It is the Applicant's understanding that the purpose of the Association is:

To promote the development, welfare and expansion of business enterprises engaged primarily in the manufacture of molds and related tooling, through the dissemination of relevant information, the exchange of ideas and pertinent data, and all and every lawful purpose or transaction in furtherance of such general purpose; to engage in such ancillary and related practices and actions as are deemed necessary to, or which may contribute to the accomplishments of such general purpose.

If elected to membership, the Applicant agrees to abide by the Articles of Incorporation, the By-Laws, and properly adopted resolutions of the members and Board of Directors of the Association.

Qualifications for Membership:

- Membership in the American Mold Builders Association is open to any *business enterprise* that manufactures or repairs molds or die cast dies at a *facility* located within the United States. A *business enterprise* includes any of the following: sole proprietorship; partnership; corporation; independently operated division or subsidiary of such.
- The member shall generate at least 50% of its mold and die cast die manufacturing revenues from activities in its U.S. *facility*.
- Qualifications for membership are subject to the review and approval by the National Board of Directors. The National Board of Directors must unanimously approve membership for all applicants.

Membership Dues Schedule:

New Member Initiation Fee: \$150 (please submit initiation fee along with membership application) *The Initiation fee will be returned if the application is not approved by the Board of Directors.*

The membership dues are based on all company employees, including owners, management, administrative and manufacturing employees. Dues are invoiced to members on an annual basis, payable by January 1. (Dues will be prorated by month for applicants joining after January.) AMBA accepts payments by check or credit card (Visa and MasterCard only).

<u># of Employees</u>	<u>Annual Dues Amount</u>
15 or less:	\$400
16 to 40:	\$650
41 to 60	\$1000
61 and over:	\$1600

**A quarterly dues pay option is available: An administrative processing fee of \$25 will be assessed each quarter for all dues paid on a quarterly basis. AMBA accepts payment by credit card only for quarterly dues installments. Dues will be automatically charged on the first day of each quarter, i.e., January 1, April 1, July 1 and October 1.*

(Note: Minnesota and Illinois chapter members include an additional \$60 assessment per year. These funds are paid back to the chapter for scholarships and chapter-related activities.)

AMBA Membership Application

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website: _____ Email: _____

Total Square Feet of Shop: _____ Year Company was Founded: _____ # of Employees: _____

How did you hear about AMBA? _____

Why did you join AMBA? _____

Membership Eligibility Questions:

1) Does your business enterprise engage in the manufacture or repair of molds or die cast dies at a facility located within the United States? _____ Yes _____ No

2) Does 50% or more of your mold and die cast manufacturing revenue arise from activities in the U.S.? _____ Yes _____ No

3) Facility Location: _____

Primary Contact: *This person has voting privileges and receives all mailings, including the quarterly AMBA publication.*

Name: _____

Title: _____ Email: _____

Additional contacts can be listed on the AMBA website & Membership Directory. Add extra sheet if necessary.

Name: _____ Title: _____

Email: _____

Company Product/Services Description (will be published on the AMBA website, the Sourcebook/Membership Directory and *The American Mold Builder* publication): Maximum 22 words or less. AMBA reserves the right to edit if necessary. Add extra sheet if necessary.

Payment Method: Check (Payable to AMBA) Visa MasterCard

Credit Card #: _____ 3-digit Security Code: _____

Expiration Date: _____ Email: _____

Name as it appears on Card: _____

Billing Address with Zip Code: _____

Signature: _____

AMBA membership dues are not deductible as a charitable contribution but may be deductible as an ordinary business expense. Applicant states that the above is true and accurate.

Date: _____ **Signature:** _____

Printed Name: _____

Please return the application along with payment for the \$150 initiation fee to:

AMERICAN MOLD BUILDERS ASSOCIATION
3601 Algonquin Road, # 304, Rolling Meadows, IL 60008
Phone 847.222.9402 ♦ Fax 847.222.9437 ♦ www.amba.org ♦ info@amba.org