



ASPI MEMBERSHIP APPLICATION

Membership Eligibility:

ASPI Membership is limited to companies that directly manufacture and supply products and/or professional services: sales agencies, sales and manufacturing representatives are not eligible for membership.

Membership Categories:

- ☐ **Supplier:** Supplier and manufacturer of products and/or professional services
- ☐ **Paper Manufacturer/Supplier:** Companies that manufacture pulp and/or paper and also supply other manufacturers of pulp and paper companies qualify for the Paper Manufacturer/Supplier Category of ASPI membership. Members have all rights and privileges except to hold office.

***Attendance at ASPI Meetings:** ASPI regularly hosts Customer Alignment Meetings where pulp and paper manufacturers share their expectations for suppliers. The host company for a meeting/session may be a competitor to ASPI members in the Manufacturer/Supplier Category. Consequently, members in this category will be allowed to attend these meeting sessions and presentations if approved by the host company.*

Membership Dues

- ☐ **\$ 2,500** Companies with less than \$5 million total annual sales*; or division/strategic business unit of company whose parent organization is an ASPI member.
- ☐ **\$ 3,000** Companies with \$5,000,001 to \$25 million total annual sales*.
- ☐ **\$ 3,500** Companies with \$25 million or more total annual sales*.
- ☐ **\$ 450** Principal Member: An individual who is an experienced industry operative that is the principal, sole practitioner of a consulting company providing professional services to the pulp and paper industry. Principal members have all rights and privileges except to hold office.

** Global sales to the pulp and paper industry*

Application

Our company applies for membership in the Association of Suppliers to the Paper Industry. I certify that for one year or more immediately preceding the date of this membership application, the company has engaged in supplying products and/or service to the pulp, paper and/or board industry. (ASPI Bylaws, Article I, Section 1.02).

I understand the mission of the Association, and if elected will abide by the ASPI Bylaws. I am aware that members of the Association will be given notice of this application within 10 days of its receipt and following this opportunity to comment, the Board of Directors shall act within 45 days on the application.

Company _____

Address _____

City, State, Zip Code _____

Telephone and Fax _____

Email/Web Address _____

Key Contact Name & Title _____

#1 Alternate Contact Name & Title _____

#2 Alternate Contact Name & Title _____

Company Description (50 word limit, please) _____

Applicant Signature: _____

Date: _____

RETURN TO: ASPI, 15 Technology Parkway S., Peachtree Corners, GA 30092
Attn: Sarah Lunceford via e-mail at slunceford@aspinet.org or fax to +770-209-7521