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MEMBERSHIP APPLICATION

Glass Manufacturing Industry Council

The Glass Manufacturing Industry Council (GMIC) is an Ohio non-profit corporation with a tax-exempt status under section 501(c)(6) of the Internal Revenue Code as a trade association. GMIC dues are not deductible as a charitable contribution for federal income taxes, but may be deductible as an ordinary and necessary business expense.*

Company Name: _____
Address: _____
Web Site: _____

Individual Submitting Application Information:

Name (last): _____ (First): _____ (MI) _____
 Title: _____ Email: _____
 Telephone: _____ Fax: _____

Company Contact for GMIC

Name (Last): _____ (First): _____ (MI): _____
 Title: _____ Email: _____
 Telephone: _____ Fax: _____

We hereby apply for membership in the Glass Manufacturing Industry Council as a (check one): - *See Code Regulations for Details*

Glass Manufacturing Member:	<input type="checkbox"/>	Associate Member:	<input type="checkbox"/>
Non-Profit Research Institute:	<input type="checkbox"/>	Glass User:	<input type="checkbox"/>
Affiliate/Individual Member:	<input type="checkbox"/>	University:	<input type="checkbox"/>

Membership Dues

A. Glass Manufacturing and Associate Members
 Companies with annual sales of glass (or) sales to the glass industry

	Annual Dues	Please indicate your sales level below
1. ≥\$1 billion	\$18,000	<input type="checkbox"/>
2. <\$1 billion ≥ \$100 million	\$15,000	<input type="checkbox"/>
3. \$100 million ≥ \$50 million	\$7,500	<input type="checkbox"/>
4. <\$50 million	\$5,000	<input type="checkbox"/>
5. Non-disclosure of sales level	\$7,000	<i>Requires Executive Committee Approval</i>
B. National Laboratories and Non-Profit Research Institutes	\$3,000	<input type="checkbox"/>
C. Glass Users	\$2,000	<input type="checkbox"/>
D. Universities	\$500	<input type="checkbox"/>
E. Affiliate/Individual Members	\$500	<input type="checkbox"/>

5% of dues will be used for lobbying activities and is NOT tax deductible

By signing this application you are certifying to the accuracy of the figures listed above.

Total amount due and enclosed: (Payment must be in U.S. funds drawn on a U.S. Bank) \$ _____

Membership is valid for a calendar year and will be prorated on a quarterly basis for periods of less than on year.

Company Representative Signature: _____ Date: _____
Print Name: _____ Title: _____

Company Information

(Please complete all relevant sections)

Primary SIC Codes relevant to our glass business: _____ (or 1997 NAICS U.S. Description)

For Glass Members:

Description of primary glass production: (Include all relevant categories: _____

For Associate Members, Non-Profit Research Institutes, Universities and Affiliate Members:

Primary Activities related to the glass industry: _____

Committees in which we have a particular interest and our representative (You may select more than one)

	<u>Name of Member:</u>	<u>Email:</u>
<input type="checkbox"/>	Batch	_____
<input type="checkbox"/>	Energy Efficiency & Education:	_____
<input type="checkbox"/>	Environmental, Health & Safety:	_____
<input type="checkbox"/>	Innovative Uses:	_____
<input type="checkbox"/>	Production Efficiency:	_____
<input type="checkbox"/>	Strength in Glass	_____
<input type="checkbox"/>	Waste Heat Management	_____
<input type="checkbox"/>	Other	_____

Other Associations of which we are members: _____

GMIC APPROVAL

Signature: _____ Date: _____
Print Name: _____
Title: _____