



INTERNATIONAL HOUSEWARES REPRESENTATIVES ASSOCIATION

175 N. Harbor Drive • Suite 3807 • Chicago, IL 60601
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Manufacturer Membership Application

Application Date \_\_\_\_\_ Year of Company Inception \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone(s) (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_;

FAX: (\_\_\_\_\_) \_\_\_\_\_ Portable (\_\_\_\_\_) \_\_\_\_\_;

Web \_\_\_\_\_; eMail \_\_\_\_\_

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

CONTACT(S):

1. Name: \_\_\_\_\_ Title: \_\_\_\_\_

2. Name: \_\_\_\_\_ Title: \_\_\_\_\_

3. Name: \_\_\_\_\_ Title: \_\_\_\_\_

PRODUCTS

Types of products / Brand names used \_\_\_\_\_

MARKETING

Do you currently market through multiple-line representatives? [ ] Yes [ ] No

If your company uses direct factory salespeople, in what areas?

Do you own any part of a distributorship? [ ] Yes [ ] No

Is your company a prime manufacturer? [ ] Yes [ ] No

An importer? [ ] Yes [ ] No

A packager / repackager? [ ] Yes [ ] No

Date \_\_\_\_\_ Signature \_\_\_\_\_

(Applicant or Officer & Title)

DUES are \$345 per year. IHRA's fiscal year is January 1 - December 31. Dues are prorated for the second year. Your check, payable to IHRA, should accompany this application, or, charge to your credit card:

[ ] AMEX [ ] VISA [ ] MasterCard # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_

Signature