



**APPLICATION FOR MEMBERSHIP**

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All information contained herein is confidential and for I.S.K.A. use only. Type or Print all information. Return your application with your check payable to I.S.K.A. Please attach your business card and submit with the application.

**(CIRCLE:)**  NEW  RENEWAL

- REGULAR MEMBER** Dues \$200; Renewal \$150
- ASSOCIATE MEMBER** Dues: \$300, Renewal \$250
- OPTIONAL: Associate Member Advertising :**  Roster Book \$250  Web site \$200

COMPANY NAME: \_\_\_\_\_

PRESIDENT/OWNER: \_\_\_\_\_

ROSTER CONTACT NAME (Your Representative to ISKA): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP / COUNTRY: \_\_\_\_\_

SHIPPING ADDRESS (If different ): \_\_\_\_\_  
\_\_\_\_\_

TEL: \_\_\_\_\_ Alternate TEL: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

WEB SITE: \_\_\_\_\_

ROSTER Recipients: (In addition to above) \_\_\_\_\_

NEWSLETTER Recipients: (In addition to above) \_\_\_\_\_

**ABOUT CO:** Founded: \_\_\_\_\_ No. Employees: \_\_\_\_\_ # \_\_\_\_\_ Sales \_\_\_\_\_ Office \_\_\_\_\_ Shop \_\_\_\_\_ Other  
CIRCLE:            Corp.            Proprietorship            Partnership            Other (Explain):

\*Biz mix % Gross Sales: \_\_\_\_\_ % Sales Merchandise / \_\_\_\_\_ % Sharpening Svc / \_\_\_\_\_ % MFG.  
Major brands (Line card distribution names) \_\_\_\_\_

So that we may thank them, who is your ISKA Referral Contact (OR How did you hear about ISKA?):  
\_\_\_\_\_

Please list other industry memberships: \_\_\_\_\_

Person filling out this form: Name / Title \_\_\_\_\_ / \_\_\_\_\_

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Please

MAIL TO: ISKA MEMBERSHIP CHAIR C/O TIM RIEF and ERIC BARR  
405 ROCKEFELLER SUITE A804 or 733 Cavender Rd SE Dalton, GA 30721 Email to: [tim@comsurge.com](mailto:tim@comsurge.com)  
or [eric.barr@expertdie.com](mailto:eric.barr@expertdie.com) and cc: [info@iska.org](mailto:info@iska.org) Questions? Call 949-480-1228 or 855-265-8011