



METAL FINISHING ASSOCIATION OF SOUTHERN CALIFORNIA INC.

APPLICATION FOR CONTRIBUTING SPONSOR MEMBERSHIP

COMPANY NAME _____

ADDRESS _____

CITY _____ ZIP _____ TELEPHONE (____) _____

YEAR ESTABLISHED _____ NUMBER OF EMPLOYEES _____ FAX (____) _____

CORPORATION

PARTNERSHIP

INDIVIDUAL

PRINCIPAL OFFICERS:

NAME: _____ TITLE: _____

NAME: _____ TITLE: _____

NAME: _____ TITLE: _____

MANAGEMENT PERSONNEL WHO WILL REPRESENT COMPANY IN EXERCISING THE PRIVILEGES OF MEMBERSHIP IN MFASC AND RECEIVE ASSOCIATION MAIL.

_____ OFFICIAL REPRESENTATIVE

_____ ALTERNATIVE REPRESENTATIVE

_____ TITLE

_____ TITLE

SPONSORED BY: _____

COMPANY NAME: _____

ANNUAL BILLING - \$500.00

We hereby apply for membership in the Metal Finishing Association of Southern California and/or in the National Association of Metal Finishers. We agree to abide by the Associations' Bylaws and Code of Ethics and to pay dues as required (dues are payable in advance). A check for our first year's dues is enclosed.

Signature

Date

<p align="center"><u>Application approved by MFASC Board of Directors</u></p> <p align="center">Date _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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WHAT FIELD OR FIELDS DOES THE COMPANY SPECIALIZE IN?

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WHAT IS YOUR PRIMARY PURPOSE IN WANTING TO CONTRIBUTE TO MFASC?

NAMES OF PEOPLE WHO MAY ATTEND MEETINGS:

_____	NICKNAME _____
_____	NICKNAME _____
_____	NICKNAME _____

FOR FURTHER INFORMATION, CALL OR WRITE:
MFASC HEADQUARTERS
P.O. BOX 923695
SYLMAR, CA 91392-3695
(818) 367-0234
(818) 367-0904 FAX

DANIEL A. CUNNINGHAM, Executive Director

