



MARBLE
INSTITUTE
of America

Marble Institute of America
Regular or Associate Application Form
2012 MIA Membership
Marble Institute of America
28901 Clemens Rd. Suite 100
Cleveland, OH 44145
(p)440-250-9222 (f)440-250-9223

Company Name _____

Physical Address _____ Mailing Address _____

City _____ State/Province _____

ZIP/Postal Code _____ Country _____

Workphone (_____) _____ Fax (_____) _____

E-mail _____ Website _____

Choose Your Membership Category:

Active Members are engaged in quarrying, manufacturing, producing, finishing, fabricating, exporting, importing, installing, or restoring natural stone.

Associate Members are engaged in the supply of auxiliary materials, products, equipment, and services to the natural stone industry.

Membership Dues through 2012.

North American—Dues \$850.00 International—Dues \$925.00

___ Active Membership

___ Associate Membership

Dues are collected on 12/31 annually, Next years dues will be prorated based on your join date.

Do you have branch facilities that require MIA services? Yes _____ No _____ # _____ / \$125.00 for each additional location listing

Please fax or e-mail address and contact information for each additional facility. Total Amount Dues _____

Method of payment for first year's dues:

(Must accompany this application)

___ **Company Check**

(Payable to MIA in US dollars)

___ **International Wire Transfer**

(Contact MIA Membership Department for routing information)

Card Number _____

Expiration Date: _____ Verification Code: _____

Name on Card (print) _____

Signature: _____

We accept Visa, MasterCard, and American Express

If credit card billing address is different from company - list:

Street Address _____

Zip Code _____

Primary company contact: _____

Printed Name

Title

E-mail

This individual will be the primary contact for all Marble Institute business matters and activities, will have the company's vote on any MIA membership issues submitted for a vote, will receive all MIA mailings and communications and agrees that the company will adhere to the MIA Code of Ethics.

Secondary Contact: _____

Printed Name

Title

E-mail

(Please complete page 2)

Type of Business: This information will be used for the next MIA Membership Directory listing.

Please circle ALL that apply:

Stone Producer/Quarrier	Stone Distributor	Stone Fabricator	Business to Business
Product Sales Agent	Stone Importer/Exporter	Maintenance/Restoration	Business to Consumer
Equipment Supplier	Stone Consultant	Stone Installer	

Products/Services: Please circle ALL the products or services that your company offers.

Primary Customer	Stone Products	Machinery/Equip/Supplies	Consulting Services
Commercial	Bluestone	Abrasives-Diamond	Architectural/Design
Residential	Cantera Stone	Accessory Equipment	Consulting/Restoration
	Granite	Adhesives/Epoxies/Resin	Engineering and Design
System Suppliers	Limestone	Edge Finishing Machinery	Estimating Software
Anchoring Systems	Marble	Hand Tools	Inspections/Appraisals
Curtainwall/Panel Systems	Precious/Semi-Stone	Grout	Testing Services
Engineering Services	Onyx	Laser Engraving Machinery	Shop Drawing/Drafting
	Quartz-based	Lifting Equipment	
Shipping/Handling	Retail Showroom	Polishes	
Material Handling	Slate	Polishing Lines	
	Travertine	Quarry Equipment	
	Wholesale Sales	Saws	
		Sealers/Impregnators	
		Sinks/Faucets	
		Template Machines	
		Water / Air Filtration	
		Waterjet Cutting	

About Your Company: The following information is kept confidential.

Number of Employees: _____ office/staff management _____ factory/shop _____ sales/field reps

Approximate Annual Sales (in US dollars):

_____ Under \$1 million _____ \$1-5 million _____ \$5-10 million _____ \$10-25 million _____ Over \$25 million

References REQUIRED – List TWO projects or customers or ONE MIA member sponsor:

Project/Customer #1 _____	Project/Customer #2 _____
Contact Person/MIA sponsor _____	Contact Person _____
Address _____	Address _____
City _____ State/Province _____	City _____ State/Province _____
Zip/Postal Code _____ Country _____	Zip/Postal Code _____ Country _____
Telephone _____	Telephone _____
Fax _____	Fax _____
Email _____	Email _____
Product or Service Provided: _____	Product or Service Provided: _____
Approximate \$ Value _____	Approximate \$ Value _____
Date Completed _____	Date Completed _____

If accepted into MIA membership, our company hereby agrees to comply with all provisions of the MIA Bylaws and to abide by the MIA Code of Ethics.

Signature: _____

Date: _____