



**Safety Equipment  
Distributors  
Association Inc.**

# ASSOCIATE MEMBERSHIP APPLICATION

Application is hereby made by the undersigned for admission to Associate Membership in the Safety Equipment Distributors Association. Dues for Associate Membership are \$1000.00 per year per company. Your dues deductible as an ordinary and necessary business expense, and are not deductible as a charitable contribution. All applications must be accompanied by a check made payable to the Safety Equipment Distributors Association (SEDA) for first year membership dues. FAILURE TO COMPLETE ALL INFORMATION MAY RESULT IN THE IMMEDIATE REJECTION OF YOUR APPLICATION.

(Please type or print)

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

Website: www \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Associate Membership Qualifications:** Any person, firm, company or corporation which is a member of the safety equipment industry trade press or which sells non-safety products, such as computer hardware, software or insurance not for resale by the distributor, or is a manufacturer's representative, to the safety equipment industry shall be eligible for Associate Membership. Companies that are suppliers of raw materials or packaging products to manufactures are not eligible for Associate Membership.

A. Number of years in the safety equipment industry: \_\_\_\_\_

B. Describe your business operations: \_\_\_\_\_

C. Please send any non-confidential sales promotional material on your product (s) or services and a copy of your printed letterhead.

I certify that the information presented in the Application for Associate Membership accurately represents my company. I hereby acknowledge failure to complete all sections of this Application may result in the immediate rejection of my Membership Application.

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

**Your dues are deductible as an ordinary and necessary business expense,  
and are not deductible as a charitable contribution.**

*Please return to:*

**SAFETY EQUIPMENT DISTRIBUTORS ASSOCIATION**

2105 Laurel Bush Road, Suite 200 • Bel Air, MD 21015 • 443-640-1065 • Fax: 443-640-1086