



# ACS MEMBERSHIP APPLICATION

YES, our organization wishes to join ACS with the number of members indicated below (active through December 31, 2016)

## Number of Members

- 1 Member (\$199)       2 Members (\$398)       3 Members (\$597)       4 Members (\$796)  
 5 Members (\$995)       6+ Members, call the membership office for extended application

## Organization Information

Company/Organization Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

## Organization List

- |  |  |   |                             |
|--|--|---|-----------------------------|
| <input type="radio"/> Cheesemaker        | <input type="radio"/> Advisor/Consultant | <input type="radio"/> Media             | <input type="radio"/> Other |
| <input type="radio"/> Retailer           | <input type="radio"/> Cheese Guild       | <input type="radio"/> Foodservice/Chef  |                             |
| <input type="radio"/> Distributor/Broker | <input type="radio"/> Specialty Food     | <input type="radio"/> Government Agency |                             |
| <input type="radio"/> Trade Equipment    | <input type="radio"/> Academic           | <input type="radio"/> Dairy Supplier    |                             |

## Member Contact Information

Please indicate the contacts to be listed for your company. Note: Name 1 will be listed as the primary contact and voting member.

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name 4: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name 5: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Payment

Method of Payment:     Check     Visa     MasterCard     American Express     Discover

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature (Required): \_\_\_\_\_

Please complete this form and submit with payment to:  
American Cheese Society    2696 S. Colorado Blvd., Ste. 570    Denver, CO 80222  
Tel: (720) 328-2788    Fax: (720) 328-2786    Email: [members@cheesesociety.org](mailto:members@cheesesociety.org)