



2018 SPPA Membership Renewal Form

Please make any necessary corrections to help us keep our database up-to-date with your most current company information.

Company Name			
Address	City	State	Zip Code
Office Phone	Office Fax	Office/General Email	
Website	Facebook	Twitter	Linked In
SAGE Number	PPAI Number	UPIC	ASI Number

Sign up now!

Choose your level of membership!

- | | | |
|--------------------------|--|-------|
| <input type="checkbox"/> | Business Services Annual Dues | \$150 |
| <input type="checkbox"/> | Supplier Annual Dues | \$150 |
| <input type="checkbox"/> | Supplier Rep Annual Dues | \$150 |
| <input type="checkbox"/> | Distributor (1-5 Sales Representatives) | \$135 |
| <input type="checkbox"/> | Distributor (6-11 Sales Representatives) | \$160 |
| <input type="checkbox"/> | Distributor (12+ Sales Representatives) | \$175 |

COMPANY REPRESENTATIVES

Please note: This year SPPA is collecting representative's mobile phone numbers in an effort to launch our mobile notifications and alerts service. Please feel free to opt out of this service by omitting the mobile number of any representative or agent who chooses not to receive these alerts and notifications.

Representative Name	Email	Mobile Phone number
Representative Name	Email	Mobile Phone number

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PAYMENT

- Visa MasterCard American Express Discover Check Enclosed

Credit Card Number	Expiration Date	CC Identification Code
Name As It Appears On The Credit Card		X Credit Card Signature
Credit Card Billing Address: Street Or PO Box	City	State/Province Zip/Postal Code

Printed Name

Title

Date

COMPANY REPRESENTATIVES CONTINUED

Representative Name	Email	Mobile Phone number
Representative Name	Email	Mobile Phone number
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