



# Michigan Meat Association

## Supplier Membership Application

7539 Clark Road, Bath, MI 48808

517-599-0036 ~ dru@michiganmeatassociation.org

<b>Date:</b>
<b>Name of Firm:</b>
<b>Name of Person Representing Firm:</b>
<b>Address of Firm:</b>
<b>Personal/Home Address:</b>
<b>Business Phone:</b>
<b>Mobile Phone:</b>
<b>Business Fax:</b>
<b>E-mail Address:</b>
<b>Website:</b>

Please select where you prefer to receive association mailings:

- E-mail address
- Business mailing address
- Home mailing address

Please describe the services or goods your firm supplies:

I, the undersigned, wish to avail myself of the opportunities for the improvement of my operation and the protection against unfavorable influences afforded by a strong trade organization. I do hereby apply for membership in the Michigan Meat Association and promise to abide by the Code of Ethics.

Printed Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Signature: \_\_\_\_\_ Sponsor: \_\_\_\_\_

**Please mail this application with your check for dues to:  
Michigan Meat Association, 7539 Clark Road, Bath, MI 48808.  
Dues are \$100.00 annually.**