I.I.S.F EXHIBITOR MEMBERSHIP

AN ORGANIZATION DEDICATED TO THE BETTERMENT OF THE INDUSTRY
P.O. BOX 189
GIBSONTON, FL 33534

UNDERSTANDING THE REQUIREMENTS LISTED BELOW, THIS COMPANY DOES HEREBY APPLY FOR EXHIBITOR MEMBERSHIP IN THE I.I.S.F.

QUALIFICATIONS FOR MEMBERSHIP

Each applicant for the Foundation shall be affiliated with or recognized by the outdoor amusement business. All questions must be answered. Initiation fee and dues must accompany this application.

PLEASE TYPE OR PRINT

Date_____Federal ID#_____

CAMPANY NAME_____

MAILING ADDRESS_____

PHYSICAL ADDRESS_____

TELEPHONE#_____FAX#_____

In what capacity is this company recognized by the profession to be principally or exclusively engaged in the manufacture or sale of outdoor show commodities.

[ ] MANUFACTURER [ ] DISTRIBUTOR [ ] AGENT [ ] OTHER

Product Classification:

[ ] Admission	[ ] Coin-Op Machines	[ ] Computer System/Software
[ ] Concession Trailers	[ ] Consultants	[ ] Clothing
[ ] Displays & Sets	[ ] Canvas/Tents/Awnings	[ ] Financing
[ ] Food & Beverages	[ ] Food Trailers	[ ] Games & Devices
[ ] Gifts/Novelties/Souvenirs	[ ] Insurance	[ ] Inflatables
[ ] Kid Rides	[ ] Lights/Lighting	[ ] Major Rides
[ ] Printing	[ ] Security Equipment	[ ] Service/Repair/Parts
[ ] Sound Systems	[ ] Trade Association	[ ] Trade Publication
[ ] _____		

ARE YOU A MEMBER IN GOOD STANDING IN ANY OTHER RELATED ORGANIZATION? [ ] YES [ ] NO

IF YES, PLEASE LIST: _____
ORGANIZATION NAME CITY PHONE

HAVE YOU EVER APPLIED FOR MEMBERSHIP IN THE I.I.S.F.? [ ] YES [ ] NO (IF YES GIVE DATE)_____

CHECK MEMBERSHIP DESIRED

PLATINUM $500.00 [ ] GOLD $250.00 [ ] SILVER $100.00 [ ]

INITIATION FEE IS $200.00 AND MUST ACCOMPANY APPLICATION.

I, The duly authorized representative of the organization shown, on behalf of said organization, request and agree to pay for exhibit space as assigned and accepted. Please sign and return.

NAME_____TITLE_____

SIGNATURE_____ DATE_____

Account # _____ (Assigned by I.I.S.F.) Date_____ Receipt # _____ Amount $_____