



● p. 612.400.6200
 ● Broadway Place West
 ● 1300 Godward St NE
 ● Suite 2650
 ● Mpls, Mn 55413
 ● www.pimw.org

ASSOCIATE MEMBER INFORMATION

ANNUAL DUES

- Number of employees: 1-2 (\$350) 3-10 (\$850) 11-30 (\$1275) 30+ (\$1590)
 Multi-state: 30+ (\$1590, up to 3 locations) additional locations \$500 each

Describe your business: _____

- Supplier Print Broker Other
 Dealer Consultant

CONTACT INFO

Company Name _____
 Street Address _____
 City/State/Zip _____
 Primary Contact Name _____
 Title _____
 Direct Phone _____
 Main Phone _____
 Fax _____
 Email _____

- Check all that apply: open shop union - local affiliation: _____
 woman-owned shop minority-owned shop

AUTOGRAPH

Authorization: by signing below, you grant PIM and it's affiliates permission to fax or email correspondence to our firm's representatives.

Please Print Name _____
 Signature _____
 Date _____
 Title _____

PAYMENT OPTIONS

- Check is enclosed Please charge my card
 Please send invoice

Card Type: Visa MasterCard American Express

Card Number _____
 Expiration Date _____
 Signature _____

- Billing address is the same as listed about
 Use billing address listed below

Street Address _____
 City/State/Zip _____



ASSOCIATE MEMBER INFORMATION

COMPANY CONTACTS

TITLE	NAME	EMAIL
CEO _____	_____	_____
CFO _____	_____	_____
Accounting Manager _____	_____	_____
Estimator _____	_____	_____
Customer Service _____	_____	_____
Sales Manager _____	_____	_____
HR Manager _____	_____	_____
Office Manager _____	_____	_____
General Manager _____	_____	_____
Production Manager _____	_____	_____
Prepress Manager _____	_____	_____
Press Supervisor _____	_____	_____
Bindery Supervisor _____	_____	_____
Shipping Supervisor _____	_____	_____
Labor Relations _____	_____	_____
Marketing Manager _____	_____	_____
Training _____	_____	_____
Puchasing _____	_____	_____
Environmental _____	_____	_____
Safety Coordinator _____	_____	_____
Maintenance _____	_____	_____
Other _____	_____	_____
Other _____	_____	_____
Other _____	_____	_____