



**APPLICATION FOR REGULAR MEMBERSHIP**

**REGULAR MEMBERSHIP**

Any person, firm, or corporation primarily in the meat packing or processing business.

In making application for membership to the Southwest Meat Association, we understand that yearly dues will be at the rate listed below per our yearly sales volume. Our check in the appropriate amount is enclosed, representing full payment for the first year. Dues are calculated on the calendar year, beginning January 1, and ending December 31, so subsequent dues will be prorated accordingly.

Gross Sales	Dues
\$0-\$2,000,000	\$650.00
\$2,000,000 - \$5,000,000	\$1,100.00
\$5,000,000 - \$15,000,000	\$1,750.00
\$15,000,000 - \$25,000,000	\$2,750.00
\$25,000,000 - \$40,000,000	\$3,500.00
\$40,000,000 and greater	\$4,400.00

Section 1070(a) of the Revenue Act requires a disclosure provision for all fundraising solicitations made after January 31, 1988 by tax-exempt organizations, other than Section 501(c)(3) groups.

“Contributions or gifts to the Southwest Meat Association (SMA) are not deductible as charitable contributions for federal-income tax purposes. However, dues payments are deductible by members as an ordinary and necessary business expense.”

Company: \_\_\_\_\_

**Key Contact:** (will be on mailing list and be key recipient of any important correspondence)

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

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

How did you hear about SMA? \_\_\_\_\_

**REPRESENTING THE MEAT INDUSTRY FOR OVER 50 YEARS**

9696 E SH 21, Suite 200, Bryan, TX 77808 • 979-846-9011 • Fax : 979-846-8198 • info@southwestmeat.org

**Management:** (please include e-mail if they would like to receive the newsletter and regulatory updates)

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

E-mail: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Total number of employees: \_\_\_\_\_

**Other Plants:** (please include corresponding contact)

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Services Performed:** (check all that apply)

Slaughterer	_____	Boner	_____	Processor	_____
Purveyor	_____	Renderer	_____	Portion Control	_____
Boxed Beef	_____	Canner	_____	Quick Freeze	_____
Grinder	_____	Other	_____		

**Product Handled:**

Beef	_____	Pork	_____	Lamb or Mutton	_____
Veal	_____	Chicken	_____	Turkey	_____
Other	_____				

**Inspection Type:**

Federal \_\_\_\_\_ State \_\_\_\_\_ Custom Exemption \_\_\_\_\_

Currently Export: \_\_\_\_\_ If no, are you interested in Exporting? Yes \_\_\_\_\_ No \_\_\_\_\_

Products Exported: \_\_\_\_\_

For Office Use Only:

Database	Membership Packet	Folder/Ledger	Directory	NL List	NL Pub	Note:
----------	-------------------	---------------	-----------	---------	--------	-------

