

NADFD

1 Windsor Cove, Suite 305 COLUMBIA, SC 29223 (803) 252-5646 1-800-445-8629

I wish to join as a Regular Member: _____

REGULAR MEMBER: Any wholesaler or distributor of decorative fabric, natural or both natural and man-made or combination fibers, or fabrics under his own name, who buys in wholesale quantity, taking ownership of the merchandise, prepares a sample/swatch book, and travels one or more salesmen shall be eligible for a regular membership. Please attach a paragraph with a brief history of your company and its focus.

I wish to join as an Associate Member _____

ASSOCIATE MEMBER: **Our major function in the decorator fabric industry is:**

Manufacturer or converter of upholstery/drapery/panel fabrics or supplies
Manufacturer of vinyl coated upholstery
Finisher and/or manufacturer of finishing chemicals and equipment Manufacturer of sample books, cards, etc.
Importer/exporter of upholstery/drapery/panel fabrics or supplies
Other (please explain) _____

Our firm sells in whole or part to distributors in the upholstery, drapery, panel or related upholstery/drapery supplies. By joining the Association we pledge to support the marketing between the distributor and the manufacturer and all the efforts of the association to improve this relationship. We will further support the Association through attendance at annual meetings, sponsor participation, and solicitation of new members. Please attach a paragraph with a brief history of your company and its focus.

Annual dues for Associate and Regular Members are \$900.00.

Check is enclosed
 Please invoice our company

Please provide the following information:

Company name _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____ Email _____

Signature of company officer or other executive authorizing this application

Name _____ Title _____

Company officer or executive who will be the company representative (delegate):

Name _____ Title _____

Company officer(s) or executive who will serve as alternative representative(s) (alternate):

Name _____ Title _____

Name _____ Title _____

Return to NADFD
1 Windsor Cove, Suite 305
Columbia, SC 29223 or fax to: 803-765-0860