



Application

FOR INDIVIDUAL ALLIED MEMBERSHIP

FORM D

FOODSERVICE CONSULTANTS SOCIETY INTERNATIONAL

3309 Robbins Road #171

Springfield, IL 62704-6587

Phone 309.808.2165 • Fax 309.585.2992 • E-mail: Penny@fcsi.org

Application also available on our Website, located at: www.fcsi.org/?ConsultantMembers

Individual Allied Membership

This membership category is for individuals in the following categories:

1. Additional personnel employed by a Corporate Member company who desires to have more than the basic number of representatives as members of FCSI.
2. Manufacturer's Representatives/Sales Reps with a formal alignment or representation agreement with a Corporate Member company.

This level of membership does not provide access to advertising, sponsorship opportunities or committee seats without a formal link to a Corporate member company.

Dues

The FCSI dues year begins January 1. Dues are pro-rated the first year based on the month in which you join.

Membership in FCSI is recorded in the name of the individual. All funds must be in U.S. Dollars. Please include first year dues with application.

Individual Allied Dues: \$590 Annually

General Information

(Please type or print legibly)

Mr. Last Name: _____ First Name: _____ Middle Initial: _____

Ms. Last Name: _____ First Name: _____ Middle Initial: _____

Company: _____

Title or Position: _____

Street Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

E-mail: _____ Company Website: _____

Product Categories

Please check your appropriate category:

- Bar Structures
- Blast Chillers/Freezers
- Blenders
- Broilers
- Cabinets
- Cart and Rack Washers
- Carts
- Custom Fabrication (stainless steel and Millwork)
- Beverage Systems
- Cold Plates
- Conveyor Systems
- Fabrication Hardware
- Food Guards
- Food Holding Containers
- Food Processing Machines
- Fryers and Fryer Filters
- Furniture/Fixtures
- Griddles
- Ice machines and Dispensers
- Information/POS/Alarm systems
- Marketing & Public Relations Services
- Merchandisers
- Ovens (deck/convention/combi/conveyor)
- Ranges (gas, electric, induction)
- Refrigeration Systems
- Refrigerators/Freezers (Reach-in, Under-counter, Walk-in)
- Safety Systems
- Sanitization Products/systems
- Shelving Systems
- Storage
- Vegetable washers and dryers
- Ware Handling Systems
- Warewashers
- Waste Disposal Systems
- Water Purification Systems
- Work Tables/Sinks
- Ventilation and Fire Suppression Systems
- Other _____

Method of Payment

- Check (included – make payable to *FCSI–The Americas*)
- Credit Card (please check one): Visa MasterCard American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ CVV # _____

Acknowledgment

I agree that all information given FCSI is complete and correct. I further agree to provide additional information, if requested by FCSI. I shall conduct my activities in accordance with FCSI's Objectives and the Code of Ethics and Professional Conduct. I further waive and release all claims, demands and actions that I now or in the future may have against FCSI, its officers, directors, trustees, members and management company for any act or omission in granting or denying membership in FCSI.

I hereby acknowledge that I qualify, to the best of my understanding, for the membership category for which I am applying, as defined by the FCSI governing documents.

Signature _____ Date _____