



The North American Blueberry Council  
Application for

Revised 07/01/09

**ASSOCIATE MEMBERSHIP**

We, the undersigned, hereby make application for membership in the North American Blueberry Council as an Associate Member and agree to abide by the rules and conditions as set forth below.

**CONDITIONS FOR MEMBERSHIP**

1. Associate Members are welcome from the following sources:
  - a) Fresh fruit brokers
  - b) Processors who do not grow blueberries
  - c) Food manufacturers who use large quantities of highbush (cultivated) blueberries
  - d) Allied industry companies who supply chemicals, packing materials, machinery, storage, etc.
  - e) Other individuals or organizations deemed qualified by the NABC
2. **Dues shall be \$700.00 annually payable in advance.**
3. Associate Members shall be subject to the following restrictions:
  - a) Associate Members cannot hold any office in the North American Blueberry Council
  - b) Associate Members are not entitled to vote on any NABC business
  - c) Associate members shall not conduct any activities that will conflict with regularly scheduled programs of the Council

**NABC ASSOCIATE MEMBER APPLICANT PROFILE**

Please complete each section. Data will be used by the NABC in initial applicant screening.

Name of Organization: \_\_\_\_\_  
*Please type or print clearly*

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

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

*Shipping Address (if different than above):* \_\_\_\_\_

*City:* \_\_\_\_\_ *State/Province:* \_\_\_\_\_ *Zip:* \_\_\_\_\_

Business Phone: ( ) \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_ Web Site: \_\_\_\_\_

Type of Business: *(check all that apply)*

- Cooperative    Corporation    Association    Partnership    Individual    Other \_\_\_\_\_  
*(please indicate)*

Description of Type of Business:  
\_\_\_\_\_  
\_\_\_\_\_

We are involved in the following blueberry related activities: *(check all that apply)*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Fruit Broker                        | <input type="checkbox"/> Machinery Supplier   | <input type="checkbox"/> Others <i>(Please indicate)</i> |
| <input type="checkbox"/> Processor (Non-Grower)              | <input type="checkbox"/> Packaging & Supplies | _____  |
| <input type="checkbox"/> Food Manufacturer Using Blueberries | <input type="checkbox"/> Storage              | _____  |
| <input type="checkbox"/> Chemical Supplier                   | <input type="checkbox"/> Research             | _____  |
|  | <input type="checkbox"/> Transportation       |  |

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

**BLUEBERRY INDUSTRY REFERENCES**

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

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

City: \_\_\_\_\_ State/Province \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_

**NABC ASSOCIATE MEMBER PRIVILEGES**

With Council approval and while a member in good standing, NABC Associate Members shall have the following privileges:

- (a) They shall receive periodic newsletters keeping them abreast of the latest developments in the Council's promotional programs.
- (b) They shall have the ability to attend meetings and meet key growers and marketers
- (c) Associate members from allied industries shall have the opportunity to exhibit at appropriate NABC meetings new products, inventions, packaging materials, etc., which they feel would be applicable to the blueberry industry subject to approval by a screening committee. Time, place and fees shall be determined by the Executive Committee.
- (d) They shall receive a copy of and a listing in the NABC directory.
- (e) They shall have access to a limited supply of NABC promotional materials
- (f) They shall have the ability to use NABC artwork, photos and logos as approved by NABC
- (g) If appropriate, they shall have the opportunity to link to the NABC web site

**INITIAL MEMBERSHIP RECOMMENDATION**

*(To be completed by NABC)*

As a member of the Executive Committee of the North American Blueberry Council, I hereby

**RETURN APPLICATION TO:**  
**The North American Blueberry Council**  
 80 Iron Point Circle, Suite 114; Folsom, CA. 95630  
 Phone: (916) 983-2279 Fax: (916) 983-9370

*recommend do not recommend* the consideration of the application of

\_\_\_\_\_ as an Associate Member of the Council.  
*(Organization Name)*

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

\_\_\_\_\_  
*(Print Name)*