

# Professional Beauty Association 2012 Organization Membership Application



Use this form to apply for membership in the Professional Beauty Association

## Contact Information

Name \_\_\_\_\_ Company or School (if applicable) \_\_\_\_\_  
 Address (no P.O. Boxes) \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Country \_\_\_\_\_ Address Type: Home \_\_\_\_\_ Business \_\_\_\_\_ School \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Email \_\_\_\_\_ (As a PBA member, you agree to receive emails from PBA)

### Additional Contacts

Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Business Phone \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Business Phone \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Business Phone \_\_\_\_\_

My contact information may be shared with other member sections and benefit provider partner companies for marketing purposes.

Yes  No

My company information may be listed on [www.probeauty.org](http://www.probeauty.org) for public reference, referral, and/or directory purposes.

Yes  No

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

Interested in volunteering? \_\_\_\_\_

What role do you play in the industry? Please select one.

- Salon with 3+ w2 employees  Manufacturer Rep  OTC/Store  
 Spa with 3+ w2 employees  Distributor  Other \_\_\_\_\_  
 School with 3+ w2 employees  Associate (Company serves the beauty industry in an auxiliary capacity; i.e. public relations firms, publishers, printing companies, graphic artists, signage, software companies and other business services. Associate membership open to all and includes the established benefits of membership with the exception of organization voting rights.)  
 Manufacturer of beauty products

## Dues

The dues amount you pay is based on your business' gross annual sales as follows.

**Note:** Dues are for calendar-year membership: January 1 - December 31.

Gross Annual Sales	Dues	Gross Annual Sales	Dues	Donate	Amount
<input type="checkbox"/> Less than \$500,000	\$175	<input type="checkbox"/> \$10 - \$25 million	\$1,500	<input type="checkbox"/> PBA   NCA Cares Fund	_____
<input type="checkbox"/> \$500,000 - \$1 million	\$250	<input type="checkbox"/> \$25 - \$50 million	\$2,500	<input type="checkbox"/> PBA Issue Advocacy Fund	_____
<input type="checkbox"/> \$1 - \$2.5 million	\$400	<input type="checkbox"/> \$50 - \$75 million	\$4,000		
<input type="checkbox"/> \$2.5 - \$5 million	\$500	<input type="checkbox"/> \$75 - \$100 million	\$5,000		
<input type="checkbox"/> \$5 - \$7 million	\$750	<input type="checkbox"/> \$100 million or more	\$7,500		
<input type="checkbox"/> \$7 - \$10 million	\$1,000				

Total Enclosed \$ \_\_\_\_\_

### Billing Preference:

Renew my membership for 2 years (double your dues payment)

## Payment

Check or Money Order # \_\_\_\_\_ (made payable to Professional Beauty Association)  American Express  MasterCard  Visa  Discover

Card # \_\_\_\_\_ Exp \_\_\_\_\_ Security Code \_\_\_\_\_

3 to 4 digit security code on your card

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

By signing here, I authorize the charges to my card.

NOTE: A portion of your dues may be tax-deductible as a business expense but not as a charitable contribution for federal income tax purposes. 35% of your dues are used for association lobbying and is not deductible in accordance with IRS Section 6033(e). Contributions to the PBA Issue Advocacy Fund are political contributions and are not deductible as a business or charitable contribution. PBA Foundation is a 501(c)(3) charitable organization, contributions to which may qualify as charitable deductions for tax purposes. Please consult your tax advisor for specific advice.