

MANUFACTURER MEMBERSHIP APPLICATION

\$1,225 membership fee, \$925 meeting voucher, and \$250 one-time initiation fee. Do not submit payment for the dues. You will be invoiced when notified of admittance.

Applying as a

Manufacturer

Preliminary Manufacturer

Company Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Fax _____ (Please enter numbers, no spaces or dashes, ex: 5553334444.)

Email _____ WWW _____

Name of Individual Completing Application _____

Senior Management Contact _____

1. How many years has your company been continuously manufacturing & selling or remarketing Industrial Automation Products (IAP)? _____

2. How many years has your company been in business? _____

3. Current annual sales of Industrial Automation Products (IAP). Check appropriate category below:

- | | | |
|--|--|--|
| <input type="checkbox"/> Under \$1 Million | <input type="checkbox"/> \$8 - \$10 Million | <input type="checkbox"/> \$50 - \$100 Million |
| <input type="checkbox"/> \$1 - \$4 Million | <input type="checkbox"/> \$10 - \$25 Million | <input type="checkbox"/> \$100 - \$150 Million |
| <input type="checkbox"/> \$4 - \$8 Million | <input type="checkbox"/> \$25 - \$50 Million | <input type="checkbox"/> Over \$150 Million |

4. Average Annual Sales of Industrial Automation Products (IAP) for past 3 years. Please check appropriate category below:

- Under \$3 Million Over \$3 Million

DISTRIBUTION POLICY

5. How many distributors and Automation Solution Providers (ASPs) do you have under contract? _____

Today:	Future:
ASPs _____	ASPs _____
Non-ASP Distributors _____	Non-ASP Distributors _____

6. Percentage of your total Industrial Automation Product (IAP) Sales? _____

Through ASPs _____ Through non-ASP distributors _____ Direct* _____

* direct sales are those sales made without any involvement by an ASP and where no commission is paid to an ASP.

7. Please check the Product Categories that you operate within.

- Variable Speed Drives Computer & PLC Peripherals Data Collection Products Electronic Sensors
- Industrial Automation Software HMI/Industrial Computers Instrumentation Machine Safety
- Man-Machine Interface Products Motion Control Products Motor Control Products PLC/PC Based
- Power Transmission Networking Technologies Pneumatics Hydraulics Machine Vision Other

8. Check the value-added services that your organization provides:

- "Show and Tell" Demonstration Concept
- Technically Qualified "Solution Selling" Sales Personnel
- Frequent Customer Seminars
- Lead Follow-Up System
- Product Display Demo Rooms
- Product Training Classes/Facilities
- System Application Engineering

Other: _____

By providing the following information, you are helping AHTD promote your company to the general membership through its detailed directory:

10. Please list the products sold by your company/division: (Attach as needed) _____

11. Please list any AHTD member ASPs who distribute your product: _____

9. OPTIONAL: List any ASPs you feel should be considered for AHTD membership: _____

CERTIFICATE OF APPLICATION

The following section must be completed in order to be considered for membership in AHTD:

The Senior Executive responsible for all sales philosophy, distribution policies, and operations for Industrial Automation Products (IAP) must agree to and in fact attend at least one meeting per year. While the Senior Executive is urged to attend two meetings per year, only one is required to maintain membership privileges.

While the Senior Executive is required to attend at least one meeting per year, AHTD encourages the participation of the CEO, President, CFO, etc., many of whom currently attend AHTD meetings.

To be a Manufacturer Member of AHTD, the applicant must fulfill, on a continuing basis, the Eligibility Requirements for Manufacturer or Preliminary Manufacturer respectively:

I certify that the primary sales channel for IAPs must be independent ASPs (i.e., ASP must operate its business free from direct or indirect control by any manufacturer whose product the ASP sells), who resell to the ultimate customer in the industrial control and plant automation marketplace.

I certify that all of the information submitted within this application is correct and in order. Additionally, I confirm that the Senior Executive described above will attend and participate in AHTD meetings, as required under AHTD bylaws.

Name _____ Title _____

Signature _____ Date _____

Print Form	Submit by Email
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The print and submit buttons work best when the application is saved to your computer first before filling out the questions.