



Building Leadership Excellence

Paper Industry Management Association

New Membership Application

15 Technology Parkway South, Norcross GA. 30092 • Phone: 770/209-7230 • Fax: 770/209-7359

Last Name: (Mr., Ms., Dr.) _____ First Name: _____ MI: _____

Job Title: _____

Company: _____

Office Address: _____

City/State/Postal Code: _____

Country: _____ Fax: _____

Phone: Office _____ Home _____

E-mail: Office _____ Home _____

Home Address: _____

Is your preferred mailing address: ☐ Office ☐ Home Spouse Name: _____

☐ Yes ☐ No I wish to receive Paper360 magazine monthly as part of my PIMA membership (CIRCODE).

Signature _____ Date _____

To receive Paper360 magazine monthly as a complimentary benefit of PIMA membership, please provide the following information (BUSOPS). Complete either question 1 or 2.

1. If your company manufactures pulp, paper or paperboard, complete either A or B below:
 - A. If you work at a mill site, check all products manufactured at your location:
☐ (3) Pulp and Paper/Paperboard ☐ (1) Pulp Only ☐ (2) Paper/Paperboard only
 - B. If you do NOT work at a mill site, check below the location that best applies:
☐ (4) Headquarters ☐ (4) Branch Office ☐ (4) Research, technical or engineering lab ☐ (40) Woodlands Operation ☐ (51) Converting Plant
2. If your company does NOT manufacture pulp, paper or paperboard, check below the nature of its business:
☐ (52) Independent Converting Plant ☐ (71) Independent Producer, Supplier or Dealer of Pulpwood or Pulp Chips
☐ (61) Consultant: Engineering, Technical, Production or Research
☐ (74) Manufacturer of Machinery, Equipment, Chemicals, Clothing or Supplies
☐ (75) Distributor of Machinery, Equipment, Chemicals, Clothing or Supplies
☐ (83) Association ☐ (81) Educational Institution ☐ (84) Other _____

MEMBERSHIP CLASSIFICATION AND DUES SCHEDULE

- ☐ I want to become a member of PIMA as indicated by the membership classification checked below. I agree to be governed by the Constitution and By-laws of the Association and to pay the prescribed dues for my membership classification.
- ☐ I understand that under new Federal Communications Commission regulations, PIMA must have my written permission in order to communicate with me via fax. I hereby give PIMA permission to communicate association news to me via: ☐ Fax number _____.

Signature _____ Date _____

- ☐ Individual Member – Annual Dues \$150.00
☐ Affiliate Member – Annual Dues \$400.00

- ☐ Future Leader Member/Student Member – Annual Dues \$15.00
☐ Retired Member – Annual Dues \$35.00

PIMA membership dues are not tax deductible as charitable contributions; however, they may be deducted as ordinary and necessary business expenses.

Payment: ☐ American Express ☐ MasterCard ☐ Visa ☐ Discover ☐ Check (see instructions below)

Credit Card Number: _____ Exp. Date: _____

Signature _____ Date _____

Send this form along with payment to: PIMA, 15 Technology Parkway South, Norcross, GA 30092

If you are paying by check: Checks must be in US funds and made payable to PIMA. Please include your name or membership number on the check. Your membership cannot be processed until payment has been received.

If you are paying by credit card: Mail to above address or FAX to: 770/209-7359