**Membership INVOICE – July 1, 2017 – June 30, 2018**

 Mailing Information:

|  |  |
| --- | --- |
| Name: |   |
| Company: |   |
| Address 1: |   |
| Address 2: |   |

 Attach Business Card

City:

Contact Information:

State/Prov.: Postal Code: \_\_\_\_\_\_\_ Country:

Work Phone:

Fax:

Toll Free:

 Home Phone:

Email:

Demographic Information: *(Required - please complete items 1,* 2, *and 3 below)*

1. POSITION CLASSIFICATION (Check primary only)

0 Management/Administration (A)

0 Manufacturing and Engineering (B)

0 Quality Control (C)

0 Research and Development (D)

0 Technical Sales/Service (E)

0 Sales and Marketing (F)

0 Consulting (G)

0 Education (H)

0 Librarian/Other (J)

(please specify) \_ \_

 2. COMPANY CLASSIFICATIONS (Check all that apply)

 Manufacturer of Sales Agent for

0 Liquid Paints (A1) 0 Equipment (D1)

0 Varnish and Lacquer (A2) 0 Raw Materials (D2)

0 Printing Inks (A3) 0 Government Agency (E)

0 Sealants and Caulks (A4) 0 Research/Testing/Consulting (F)

0 Adhesives (AS) 0 Educational Institution/Library (G)

0 Powder Coatings (A6) 0 Paint Consumer (H)

0 UV/Radiation Curable Coatings (A7) 0 Environmental Affairs( I )

0 Raw Materials (B) 0 Computer Software/Services (K)

0 Equipment and Containers (C) 0 Other (J)

0 Construction Chemical Intermediates (please specify) \_

3. PRIMARY COMPANY CLASSIFICATION (Circle only one)

Which one of the above company classifications best describes your company? A1 A2 A3 A4 AS A6 A7 B C D E F G H I J

Special Interests: (Check all that apply)

 0 Corrosion/Durability

 0 Mfg./Production Issues

 0 Quality Control

 0 Testing Procedures

 0 Wood Coatings

**Annual SSCT Dues: $50.00**

**Scholarship Donation:**

**Business Card on Website:**

**Total:**

Scholarship Donation:

Please consider making a donation towards the

SSCT Member-Only Scholarship Program! Only children of members are eligible!

Donation amounts: $5 $10 $15 $ \_\_

Business Card Posting on SSCT Website:

Please mail or scan business card – Annual Cost $50

 **CHECK – Mail to SSCT, 2808 Jefferson Drive, Hattiesburg, MS 39402**

 **CREDIT CARD – Visa, MasterCard, AMEX – scan form to** **ssctorg@gmail.com** **or fax to 855.758.3783**

 *Number Expiration Date*

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 *Security Code Zip Code Signature*

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