



Membership Application

WIRE MANUFACTURER APPLICATION

MEMBERSHIP CATEGORY AND DUES

Membership Category
(Mark your membership category.)

Wire Manufacturers

- Active Member
- Associate Wire Manufacturer
- Associate Canadian Manufacturer
- Associate Mexican Manufacturer

Annual Dues Rates

First years' dues is 50% of the appropriate annual dues and is payable upon application. Beginning in the anniversary quarter of your membership, one-fourth of the annual dues will be invoiced quarterly.

Dues Categories - Annual Rod Purchases

(Mark the appropriate category for your company.)

	Tons of Rod	Active	Associate
<input type="checkbox"/>	Carbon 0 to 1,999	\$1,140	\$1,360
<input type="checkbox"/>	Stainless 0 to 1,999	\$2,240	\$1,360
<input type="checkbox"/>	2,000 to 4,999	\$2,580	\$1,560
<input type="checkbox"/>	5,000 to 9,999	\$3,480	\$2,100
<input type="checkbox"/>	10,000 to 14,999	\$4,460	\$2,700
<input type="checkbox"/>	15,000 to 34,999	\$5,660	\$3,400
<input type="checkbox"/>	35,000 to 49,999	\$7,040	\$4,260
<input type="checkbox"/>	50,000 to 99,999	\$8,540	\$5,160
<input type="checkbox"/>	100,000 to 149,999	\$9,380	\$5,620
<input type="checkbox"/>	150,000 to 249,999	\$10,060	\$6,040
<input type="checkbox"/>	250,000 to 499,999	\$11,160	\$6,700
<input type="checkbox"/>	500,000 to 749,999	\$12,300	\$7,400
<input type="checkbox"/>	750,000 & Over	\$13,400	\$8,060

CONTACT INFORMATION

American Wire Producers Association

PO Box 151387
Alexandria, VA 22315

info@awpa.org
703.299.4434

WWW.AWPA.ORG

HEADQUARTERS COMPANY INFORMATION

PRIMARY REPRESENTATIVE - NAME/TITLE	
COMPANY NAME	
ADDRESS/PO BOX	
CITY, STATE/PROVINCE, ZIP	
PHONE	FAX
EMAIL	WEBSITE
1. OTHER REPRESENTATIVE - NAME/TITLE	
OTHER REPRESENTATIVE - PHONE/EMAIL	
2. OTHER REPRESENTATIVE - NAME/TITLE	
OTHER REPRESENTATIVE - PHONE/EMAIL	

OPERATING FACILITIES

Please list all operating facilities.

List any additional plants on the back of the form.

1. PLANT MANAGER	TITLE
PLANT NAME	
ADDRESS (MUST LIST STREET ADDRESS)	
CITY, STATE, ZIP	
PHONE	EMAIL
NUMBER OF EMPLOYEES	UNION
2. OTHER PLANT MANAGER	TITLE
PLANT NAME	
ADDRESS (MUST LIST STREET ADDRESS)	
CITY, STATE, ZIP	
PHONE	EMAIL
NUMBER OF EMPLOYEES	UNION