



International Association of Ice Cream Distributors & Vendors
3601 East Joppa Road, Baltimore, MD 21234
Phone: (410) 931-8100 | Fax: (410) 931-8111
Email: info@iaicdv.org | Web: www.iaicdv.org

MEMBERSHIP APPLICATION

*Company Name: _____

*Address: _____

*City, State, Zip, Country: _____

*Business Phone: _____ Business Email: _____

*Website: _____

*Primary Contact Name: _____ *Title: _____

*Phone: _____ *Email: _____

*Company Bio & Description of Business to be Used in the IAICDV Member Directory: _

*# of Vending Vehicles: _____ *# of Carts: _____ *# of Vending Machines: _____

*# of Routes: _____ *# of Bicycles: _____ *# of Cabinets: _____

Company Branches (if applicable): _____

*Year business started: _____

*Have you ever been an IAICDV member in the past? If so, when? _____

*How did you learn about IAICDV? _____

Member sponsor's name / company (if applicable): _____

Any additional information that may be helpful in evaluating your application (if applicable):

Searchable directory categories: (Select ALL that apply.)

Broker

DSD

Food Service

Grocery

Mobile Vending

Special Events

COMPANY CONTACTS

Please list all contacts who should be included in the company membership.

Name: _____

Job Title: _____

Email (required): _____

Phone: _____

Branch Location (if applicable): _____

Name: _____

Job Title: _____

Email (required): _____

Phone: _____

Branch Location (if applicable): _____

Name: _____

Job Title: _____

Email (required): _____

Phone: _____

Branch Location (if applicable): _____

Name: _____

Job Title: _____

Email (required): _____

Phone: _____

Branch Location (if applicable): _____

More contacts may be added by printing additional copies of this page.

MEMBERSHIP CATEGORY

OPERATOR / DISTRIBUTOR MEMBER

Operators of mobile vending vehicles (trucks, pushcarts, bicycles), Distributors of product that sells to the vending trade and Distributors of product to own fleet or independent fleet.

Operator / Distributor I \$495

- Applies to Indirect Buy / Non Master or Non Preferred Vendors and Distributors. Generally smaller company.

Operator / Distributor II \$1,250

- Applies to Direct Buy / Master or Preferred Vendors and Distributors. Generally larger company.

SUPPLIER MEMBER

Manufactures their own product or has produced private label product; sold directly to Vendors or Distributors; or through a Broker.

Supplier \$2,000

- Manufactures their own product or has produced private label product sold directly to Vendors or Distributors, or through a Broker.

BROKER MEMBER

Represents one or more Suppliers, and sells food product (or services) in the ice cream vending and/or distribution industry (never takes ownership of the product)

Broker \$1,000

New members joining between July 1 and November 30 shall pay half the annual dues.

**I agree that all the information above is true and valid to the best of my knowledge:*

Primary Contact Signature: _____ Date: _____

PAYMENT OPTIONS:

Check (Make checks payable to IAICDV)

Credit Card:



Card #: _____ CVV #: _____ Expiration Date: _____

Card Holder's Name: _____ Signature: _____

Billing Address (if different than company address above)

Your dues may be deductible as an ordinary and necessary business expense. Your dues are not deductible as a charitable contribution.

Please note: Your membership will not be activated until payment is received.

You may mail, email or fax your completed application to IAICDV Headquarters at the number or address listed at the top of page 1.