

**MEDIA & MARKETING/ADVERTISING COMPANY**  
**Membership Application**

Tax ID #: 13-1390920

**Name and address of company applying for membership:**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Website Address: \_\_\_\_\_

**Name and title of Official Representative for your company's membership:**

Name & title: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please let us know what prompted you to join the Council:**

\_\_\_\_\_  
\_\_\_\_\_

<b>Print/Electronic Media &amp; Marketing, Advertising Firms</b>	<b>\$3,500</b>
------------------------------------------------------------------	----------------

Enclosed is a check (U.S. dollars only, drawn on U.S. bank) in the amount of \$ \_\_\_\_\_ determined by the above dues schedule. **Please make check payable to Personal Care Products Council.**

Please Charge my credit card:  American Express  Visa  MasterCard

Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

*Dues payments to the Council are not deductible as charitable contributions, but can be considered an ordinary and necessary business expense for federal income tax purposes. A portion of dues is not deductible as an ordinary and necessary business expense to the extent that the Council engages in lobbying. The non-deductible portion of dues for 2012 is estimated to be 26%.*

I certify that the amount entered above is the correct amount due the Council for 2012 membership dues for my company/parent/subsidiaries/divisions/affiliates.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To begin your membership: Return this form, your completed dues calculation form, and dues payment to:  
Personal Care Products Council, 1101 17<sup>th</sup> Street, NW, Suite 300, Washington, DC 20036.**