



Mississippi Manufacturers Association

# Application for Membership

Mississippi Manufacturers Association, Inc.,

P. O. Box 22607, Jackson, MS 39225-2607

Phone (601) 948-1222 FAX (601) 948-1475 or (601) 948-6197

Web site: mma-web.org; Federal Tax ID No. 64-0318536

Company Name \_\_\_\_\_

Street Address (including city, state & zip code) \_\_\_\_\_

Mailing Address (including city, state & zip code) \_\_\_\_\_

County \_\_\_\_\_ Company Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

Company Website Address \_\_\_\_\_ Establish Link from MMA Website? \_\_\_\_\_

Product/Service Description \_\_\_\_\_

NAICS Code No(s). \_\_\_\_\_ Number of Employees (annual average) \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

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

(Are you the person responsible for approving payment of membership dues? \_\_\_\_ If not, please provide name and address information on reverse side.)

*Please complete the reverse side by listing staff members to be placed on the MMA mailing list.*

## MMA By-Laws

### Article IV - Annual Dues

Section 1 - Dues for membership shall be established by the Board of Directors.

Section 2 - Any member of the Association who shall be delinquent for a period of 90 days from the time due shall be notified of such delinquency. If payment of dues or an agreement of payment of dues is not made within the next 30 days, the delinquent member shall be dropped from the rolls and thereupon forfeit all rights and privileges of membership.

### Some Dues Not Deductible

Dues to the Mississippi Manufacturers Association, Inc. are not deductible as charitable contributions. However, they may be deductible as a necessary business expense. Pursuant to passage of the federal Omnibus Reconciliation Act of 1993, any portion of your dues used for lobbying activities is not deductible. We have determined that 25% of your dues amount is non-deductible.

### Determining Your Dues

Please find your dues amount in the listing below and check the appropriate space at right.

| No. of Employees | Annual Dues |
|------------------|-------------|
| 1-5              | \$ 240 ( )  |
| 6-10             | 265 ( )     |
| 11-15            | 300 ( )     |
| 16-25            | 350 ( )     |
| 26-40            | 375 ( )     |
| 41-50            | 400 ( )     |
| 51-100           | 450 ( )     |
| 101-150          | 500 ( )     |
| 151-200          | 600 ( )     |
| 201-300          | 700 ( )     |
| 301-400          | 800 ( )     |
| 401-500          | 900 ( )     |
| 501-600          | 1,000 ( )   |
| 601-700          | 1,150 ( )   |
| 701-800          | 1,450 ( )   |
| 801-900          | 1,600 ( )   |
| 901-1000         | 1,750 ( )   |
| 1001-1500        | 2,000 ( )   |
| 1501-2000        | 2,500 ( )   |
| 2001-3000        | 3,000 ( )   |
| 3001-4000        | 3,500 ( )   |
| 4001-5000        | 4,500 ( )   |
| 5000+            | 5,000 ( )   |

|          |                 |                   |                   |                  |                 |               |
|----------|-----------------|-------------------|-------------------|------------------|-----------------|---------------|
| For MMA  | Vote _____      | Date Rec'd _____  | Amt Paid _____    | Inv Sent _____   | Sold By _____   |               |
| Use Only | MMA Dist. _____ | Cong. Dist. _____ | House Dist. _____ | Sen. Dist. _____ | Wkrs Comp _____ | Grp Ins _____ |

To help us distribute information most effectively, please indicate staff members with responsibility in the following areas. Where possible, we will try to direct our mailings accordingly.

**Chief Executive Officer**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Chief Financial Officer**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Human Resources**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Energy**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Environmental**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Government Affairs**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Training**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_

**Membership Dues Payments**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail \_\_\_\_\_