



Supplier Membership Application

Please complete the following application and return with the appropriate payment to:
 NATURAL PRODUCTS ASSOCIATION
 DEPT. #7913
 LOS ANGELES, CA 90084-7913

Phone: (800) 966-6632
 Fax: (714) 460-7444
 membership@NaturalProductsAssoc.org
 www.NaturalProductsAssoc.org

1. PLEASE PRINT

Business Name		Total Annual Sales	
Name (last)	(first)	(title)	
Address			
City	State	Zip/Postal Code	Country
Telephone (include area/country code)		E-mail Please check how you want to receive news bulletins <input type="checkbox"/> E-mail or <input type="checkbox"/> Fax	
Fax (include area/country code) <i>Dedicated number required to receive automated news bulletins</i>		Web site	
Voter Name (individual authorized to vote in Natural Products Association elections, if different from above)			

2. Which type of business best describes your company?

- Manufacturer
 Distributor
 Supplier
 Exporter
 Importer

Do you manufacture or distribute under your own label?

- Yes
 No

What do you manufacture or distribute? (check all that apply)

- Food
 Dietary Supplements*
 Herbal Products*
 Homeopathies
 Aromatherapies
 Health & Beauty Aids
 Appliances, Equip., Etc.
 Raw Materials
 Pet Supplies
 Other _____

Note: Supplier membership is a voting category.

*If your company manufactures or distributes finished product dietary supplements or herbal products, you are required by the Natural Products Association By-laws to belong to the TruLabel Program to be a member of the Natural Products Association. If your company is in this category and is not a member of TruLabel, call the Natural Products Association at (800) 966-6632, ext. 247 for registration forms and guidelines. A brochure describing the TruLabel Program is attached to this application.

By submitting this application, the applicant agrees not to sue and to hold the Natural Products Association or any of its officers, directors, members and their agents harmless with respect to any actions taken by the Natural Products Association or any authorized Natural Products Association committee with respect to the TruLabel or member program and the member's products, unless such actions result from gross negligence or reckless and wanton misconduct. A portion of Natural Products Association dues are deductible as an ordinary business expense under Section 162 of the Internal Revenue Code. You will receive written notification after the application is processed.

3. PAYMENT METHOD: If paying by credit card, fax this form to **(714) 460-7444**. Dues are based on an anniversary year and are non-refundable.

Total Industry Sales in US dollars	Dues Amount
<input type="checkbox"/> 0 – 250,000	\$400
<input type="checkbox"/> 250,001 – 500,000	\$700
<input type="checkbox"/> 500,001 – 1,000,000	\$1,400
<input type="checkbox"/> 1,000,001 – 3,000,000	\$2,000
<input type="checkbox"/> 3,000,001 – 5,000,000	\$2,700
<input type="checkbox"/> 5,000,001 – 12,000,000	\$4,000
<input type="checkbox"/> 12,000,001 – 16,000,000	\$5,500
<input type="checkbox"/> 16,000,001 – 25,000,000	\$8,000
<input type="checkbox"/> 25,000,001 – 50,000,000	\$10,000
<input type="checkbox"/> 50,000,001 – 100,000,000	\$17,500
<input type="checkbox"/> 100,000,001 – and above	\$17,500 plus \$1,500 per add'l \$100 million
<input type="checkbox"/> Maximum dues	\$30,000

Date _____ Amount Paid \$ _____

Check (make payable to Natural Products Association)
 AmEx MasterCard Visa

Card Number _____ CID#* _____ Exp. _____

Cardholder name _____

Cardholder billing address _____

City _____ State _____ Zip _____

Cardholder Signature _____

*You must provide your Credit Card Identification Number (CID) that is located on the back of your Visa or MasterCard (3 DIGIT) and on the front if you have AMEX (4 DIGIT).

IMPORTANT: This invoice **does not** include regional dues. All Natural Products Association national members are encouraged to join the region in their area. The new reduced membership fee includes only one subscription to the Natural Products Association newsletter.

Natural Products Association Membership Code of Ethics:

As a member of the Natural Products Association, I will do my best to adhere to the following Code of Ethics:

1. I shall sell or supply only those nutritional foods, dietary supplements and related products and services that may be helpful to consumers who seek to maintain or improve their health.
2. I shall support, promote and sell those products that are consistent with the recognized concepts of natural foods and compliant with Natural Products Association product guidelines.
3. I shall sell only those products and services that are truthfully and legally labeled.
4. I shall engage in treatment, diagnosis, or prescribing only if lawfully licensed to do so.
5. I shall engage only in business practices that are legal, including marketing and advertising that is truthful and non-misleading.
6. I shall support public measures that protect the environment, safeguard natural resources and improve the quality of life.
7. I shall support with individuals and organizations to increase nutritional information and enhance consumer rights.
8. I shall be responsible and ethical in my relationships with customers, employees, peers, competitors, governments, and neighbors. In the pursuit of this code and these goals, I will defend our First Amendment right of freedom of speech and press to lawfully impart truthful information concerning diet and nutrition and will defend the health freedom right of consumers to obtain such information from the sources that they may choose.

Please initial that you have read and accepted the Natural Products Association Code of Ethics: _____

