

SIGNATURE:

PRINT NAME:

National Association of Minority Companies Inc.

SUPPLIER MEMBERSHIP APPLICATION

Please make checks payable to:

NAMC National Association of Minority Companies Inc.

7404 Trade St. • San Diego, CA 92121

PURPOSE

The National Association of Minority Companies Inc. (NAMC) is a national nonprofit business association which represents diverse businesses across the country. Through advocacy and education, our organization promotes the economic and legal interests of minority, women and veteran firms. By reducing and removing barriers to full equality, we can bring about wider procurement and increased business opportunities for members and minority businesses everywhere.

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Company:			Billing Contact:					
Address:			Billing Address:					
City, State & Zip:			Billing City, State & Zip:					
Web Address:			Billing E-mail:					
Phone:	Fax:		Billing Phone:			Billing Fax:		
Senior Company Official :	:	Title:	Е	-mail:				
Who at your company is NAMC primary contact? :		Title:	Е	-mail:				
Business Development/ Marking Contact:		Title:	E	-mail:				
Authorizing signature:		Title:	E	-mail:				
Name of NAMC member encourage you to join / Co								
Your products and service	es:		C	SI Codes:				
Number of Employees:	Does your firm have	any of the following certifi	ications?	MBE	HUB	DBE	WBE	8a
		SOCIAL MEDIA	NETWORK					
Facebook? If so what is your Profile N	Twitter? your Profile Name: If so what is your Profile Name			LinkedIn? If so what is your Profile Name:				
		SUPPLIER						
Supplier Mem	nber - Supply material	to contractors, shops or j	ob sites, but p	provide no	no-site lab	or		
Suppliers members	Supplie	Suppliers membership Annual Dues Over 1M - \$600:						
Cont Please return co	tributions or gifts to NAM empleted application ar	ole as a business expense for IC are not deductible as chari nd payment via fax to (858) ompanies Inc., Attn: Stude	itable contribution 546-1896, e-m	ons for fede ail to info@	ral income to namesta.or	ax purpose. g, or mail to,		

DATE:

TITLE: