



2010 MEMBERSHIP DIRECTORY UPDATE

PLEASE MAKE ALL NECESSARY CHANGES ON THIS FORM!

Please return this form by **MARCH 9, 2010 REGARDLESS** if all the information is correct.

Thank you for your help!

Listing Example:

YOUR COMPANY NAME	Your Telephone Number
Your Address	Your Fax Number
City, State Zip Code	Your E-Mail Address
<i>*COMPANY CONTACT NAME</i>	Your Website

Description Example:

Manufacturer of embossed wood moldings, cut dentil moldings, rosettes, and turned rope molding.

PLEASE MAKE THE FOLLOWING CHANGES TO OUR LISTING:

PLEASE LIST 2 CONTACTS TO BE PRINTED IN THE DIRECTORY:

Company Name: _____

Primary Contact: _____ E-Mail: _____

Alternate Contact: _____ E-Mail: _____

ADDRESS: _____

TEL #: _____ FAX #: _____

WEBSITE: _____ COMPANY E-MAIL: _____

TOLL FREE #: _____ CERTIFICATIONS: _____

30 WORD DESCRIPTION: _____

SIGNATURE: _____ DATE: ____/____/____

TOTAL NUMBER OF EMPLOYEES: _____ *Administrative & Production Should Be Included.*

RETURN FAX (978) 874-9946