



**To prospective distributor members:**

After reviewing the distributor application, should you have questions please contact AMD at 800-786-7274.

*When completing the Distributor Member Application please note the following:*

1. In order for a Distributor Member to be accepted into the Association, subsequent to the approval of the application, all millwork business locations (branches, divisions or otherwise) for the prospective member must be part of the Association membership unless a location ceases to qualify in accordance with the AMD bylaws.  
The current bylaws can be viewed at [www.amdweb.com/bylaws/](http://www.amdweb.com/bylaws/)
2. Each application is presented to the AMD membership committee and Board of Directors for review. This review process takes 30 days after we receive your application.
3. Your first year's membership dues should accompany your fully completed and signed application.
4. In the last quarter of each year, current Distributor members certify to the Association that they continue to qualify for membership by completing a "Membership Certification" form.



**ASSOCIATION OF MILLWORK DISTRIBUTORS**  
 SERVING THE WINDOW, DOOR, AND MILLWORK INDUSTRIES  
**APPLICATION for DISTRIBUTOR MEMBERSHIP**

Date \_\_\_\_\_

Name of Company \_\_\_\_\_ Email \_\_\_\_\_

Company Owner \_\_\_\_\_ Title \_\_\_\_\_

Company Address \_\_\_\_\_ PO Box \_\_\_\_\_  
(physical address required)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact _____	Title _____
Contact Address _____	<small>(if different from above)</small>
City _____	State _____ Zip _____
Country _____	Postal Code _____
Phone _____	Fax _____
Contact E-Mail _____	Company Website _____

Other millwork locations Yes  No  If yes, list on attached form

**Ownership of company**

Individually owned

Partnership

Corporation

List names and titles of officers.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Year business established \_\_\_\_\_ Number of employees \_\_\_\_\_

1-Step Distributor  2-Step Distributor  Both 1-Step & 2-Step  Professional Dealer

Does your firm own or are you associated with any retail outlets?  Yes  No

If yes, list locations \_\_\_\_\_

If yes, what percentage of sales are to these outlets \_\_\_\_\_ %

Number of full time sales persons calling on customers \_\_\_\_\_

Number of delivery vehicles to service customers \_\_\_\_\_ Square footage of office and warehouse space \_\_\_\_\_

Do you purchase millwork/related products in bulk quantities?  Yes  No

Do you invoice and assume full credit responsibility for all sales?  Yes  No

List your products: \_\_\_\_\_

What other associations does your company belong to?

\_\_\_\_\_

Applicant will pay dues to the Association based upon combined annual total sales volume. Please list below all branch warehouse sales combined with home office sales for the past three years.

_____ \$ _____
Year                      Amount

_____ \$ _____
Year                      Amount

_____ \$ _____
Year                      Amount

Choose your appropriate sales volume category and location to calculate your annual dues below:

Sales Volume Category	Home Office Location	Annual Dues*		Other Millwork Locations		One-Time Application Processing Fee		Total Amount
<b>Up to \$5 Million</b>	Continental US	\$1000	+	_____ @ \$100/ea	+	\$125	=	_____
	Canada/Mexico	\$1060	+	_____ @ \$100/ea	+	\$125	=	_____
	International	\$1100	+	_____ @ \$100/ea	+	\$125	=	_____
<b>\$5 to \$10 Million</b>	Continental US	\$1300	+	_____ @ \$100/ea	+	\$125	=	_____
	Canada/Mexico	\$1360	+	_____ @ \$100/ea	+	\$125	=	_____
	International	\$1400	+	_____ @ \$100/ea	+	\$125	=	_____
<b>\$10 to \$20 Million</b>	Continental US	\$1750	+	_____ @ \$100/ea	+	\$125	=	_____
	Canada/Mexico	\$1810	+	_____ @ \$100/ea	+	\$125	=	_____
	International	\$1850	+	_____ @ \$100/ea	+	\$125	=	_____
<b>Over \$20 Million</b>	Continental US	\$2500	+	_____ @ \$100/ea	+	\$125	=	_____
	Canada/Mexico	\$2560	+	_____ @ \$100/ea	+	\$125	=	_____
	International	\$2600	+	_____ @ \$100/ea	+	\$125	=	_____

- \* An additional \$60 per location for companies in Canada and Mexico and an additional \$100 for all other international companies have been included in the annual dues for shipping and handling costs.
- A re-instatement fee of \$200 will apply if a distributor's membership should lapse for a period of three or more months.
- Checks accompanying membership applications should be made payable to "AMD" in U.S. currency only.
- Checks will be deposited; however, this does not imply AMD membership approval.
- In the event AMD membership is not granted, applicant will be issued a full refund.

Applicant agrees that if accepted for Distributor Membership in the Association, they are bound by such provisions of the Association bylaws that apply to Distributor Members and applicant further agrees to annually pay all dues, fees, and assessments when they are due.

**AMD BYLAWS, ARTICLE III, SECTION 8, MEMBERSHIP:**

All memberships shall be for a minimum period of one year. Thereafter, any member shall have the right to withdraw from the Association by giving thirty days' written notice. The withdrawal shall become effective upon the expiration of the notice and upon fulfillment of all obligations to the Association through the date of withdrawal.

**IMPORTANT:** AMD membership is non-transferable. Membership dues are non-refundable and are billed annually for the period January 1 – December 31. Companies that join during this cycle will receive a dues credit for the following dues year based on the time lapsed in the cycle. AMD dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense. AMD reserves the right to make adjustments to dues as necessary.

**If referred by an AMD Member, please provide the following information for our Member-Get-A-Member Campaign:**

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Phone: \_\_\_\_\_

The signature below represents an officer of the company and is an authorized signator.

Print Name \_\_\_\_\_ Title \_\_\_\_\_

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

**AMD  
USE ONLY**

Date \_\_\_\_\_ Dues Payment Received \$ \_\_\_\_\_ Check # \_\_\_\_\_ Balance Due \$ \_\_\_\_\_ Staff \_\_\_\_\_

Application Reviewed \_\_\_\_\_ Date \_\_\_\_\_

Date Submitted to Board \_\_\_\_\_ Membership Approved \_\_\_\_\_ Membership Denied \_\_\_\_\_

# ADDITIONAL LOCATIONS

Please attach additional location information as needed.

Branch location for \_\_\_\_\_  
Company Name

Company \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

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

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

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Branch location for \_\_\_\_\_  
Company Name

Company \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

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

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

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Branch location for \_\_\_\_\_  
Company Name

Company \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

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

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

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**Association of Millwork Distributors**