



Date of Application: _____
 Date of Executive Committee Approval: _____
 (to be completed by ADPI)

APPLICATION FOR MEMBERSHIP

We hereby make application for membership in the American Dairy Products Institute. We will comply with the Institute's By-Laws, making payment of dues as determined and set forth therein.

 Organization Name

By _____ Title _____

Mailing Address: _____ City _____ State _____ Zip Code _____ Country _____

Street Address: (if different) _____ City _____ State _____ Zip Code _____ Country _____

Signature _____ Office # _____ Mobile # _____

Email Address _____ Website/URL _____

- Class of Membership: (check one)
- Processor
 - Trading Company Tier-I
 - Trading Company Tier-II
 - Affiliate
 - Utilization
 - International

Note: Applicants for Processor and/or Trading Company Tier-I membership must complete and submit volume survey form for dues determination. All information provided to ADPI is held as strictly confidential.

Return to: Steve Griffin, Director- Finance & Administration sgriffin@adpi.org