



# GREAT LAKES KILN DRYING ASSOCIATION

office@glkda.org ♦ 1353 W HWY US 2, Suite 2 ♦ Crystal Falls, MI 49920

## **2021 Dues Renewal/Membership Application/Information Form**

**Please complete and return with dues payment (see reverse side for payment info)**

Contact Person: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

In the space below, list the names of additional company representatives (maximum of 2 people for Company/Organization Memberships and 9 people for Supporting Memberships). If this application is for Supporting Membership and you are listing representatives with mailing addresses different from the one given above, please include the address.

<u>Name:</u>	<u>Email:</u>	<u>Name:</u>	<u>Email:</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

To provide information in our Members Directory for customers and suppliers, and to be listed in the proper category, please check categories which apply to your business:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Boiler Systems and Services | <input type="checkbox"/> Flooring Manufacturer      | <input type="checkbox"/> Lumber Exporting              |
| <input type="checkbox"/> Coatings/Preservatives      | <input type="checkbox"/> Furniture Manufacturer     | <input type="checkbox"/> Millwork Manufacturer         |
| <input type="checkbox"/> Custom Lumber Drying        | <input type="checkbox"/> Industry Trade Group       | <input type="checkbox"/> Research                      |
| <input type="checkbox"/> Custom Planing              | <input type="checkbox"/> Kiln Control Systems       | <input type="checkbox"/> Retail Lumber Sales           |
| <input type="checkbox"/> Dimension Parts             | <input type="checkbox"/> Kiln Manufacturer          | <input type="checkbox"/> Sawmill                       |
| <input type="checkbox"/> Drying Consultant           | <input type="checkbox"/> Kiln Parts and Accessories | <input type="checkbox"/> Wood Moisture Meters          |
| <input type="checkbox"/> Education/Extension         | <input type="checkbox"/> Kiln Repair Services       | <input type="checkbox"/> Other (please describe) _____ |

**Type of Kiln Facilities:** \_\_\_ Conventional \_\_\_ Dehumidification \_\_\_ Vacuum \_\_\_ Other: \_\_\_\_\_

**Kiln Volume:** \_\_\_\_\_ MBF **Major Species** (up to five): \_\_\_\_\_

**Complete reverse side with payment information.**

## 2021 Membership Dues Payment

### EARLY BIRD DISCOUNT

#### Dues are as follows if paid before December 31, 2020:

- \$30/calendar year for the basic Company/Organization Membership, or
- \$95/year for Supporting Membership, or
- \$15/year for Individual Membership (i.e. an individual person not joining as a business/organization)

#### Dues are as follows if paid after December 31, 2020:

- \$35/calendar year for the basic Company/Organization Membership, or
- \$100/year for Supporting Membership, or
- \$20/year for Individual Membership (i.e. an individual person not joining as a business/organization)

#### Type of membership: (please check appropriate type)

\_\_\_\_\_ Company/Organization      \_\_\_\_\_ Supporting      \_\_\_\_\_ Individual

#### Method of payment. Check one:

\_\_\_\_\_ Paying with a check. Make check out to GLKDA and mail with this form to:

GLKDA  
1353 W HWY US 2, Suite 2  
Crystal Falls, MI 49920

\_\_\_\_\_ Paying with credit card. Complete the following:

Amount charged: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address Zip Code: \_\_\_\_\_

Email (for sending receipt): \_\_\_\_\_