

Application for Membership - Full or Associate

Please complete the information requested below and return the form to the U.S. Agricultural Export Development Council (USAEDC). Your application for membership will be considered at the next regularly scheduled Executive Committee and Board of Directors Meeting. You will be notified at the conclusion of the meeting and if accepted, appropriate dues will be assessed. Thank you.

Organization

	<u>iizatiori</u>			
Organ	ization Name:			
Addre	ss:			
City:_		State:	ZIP:	
Telepl	none number:	Fax number:		
E-Mai	l:	Web Site:		
<u>Chief</u>	Operating Officer			
Name	· ·			
Title:_				
		above):		
() <u>Co</u>	operator (Full) Membership			
()	This organization wishes to apply for <i>Cooperator Membership</i> with the U.S. Agricultural Export Development Council and currently has a signed cooperative program agreement with USDA's Foreign Agricultural Service (FAS) for:			
()	Foreign Market Developm	oreign Market Development (FMD) Funds		
()	Market Access Program (MAP) Funds		
() <u>Ass</u>	sociate Membership			
()	grant funds or wishes to a	direct recipient of MAP/FMD program upply for <i>Associate Membership</i> due to the tin the export of certain commodities	o 1) Its affiliation with (describe	

U.S. Agricultural Export Development Council 2111 Wilson Boulevard, Suite 700 Arlington, VA 22201 Phone: 703-556-9290