

SFLOMA Membership Application

Store/Business Name _____

Address _____

Phone _____

Fax _____

Email _____

Web address _____

Owner/Principal Name _____

Alternate contact _____

Type of Business _____

Principal Product(s) _____

Please answer the following qualifying questions about your business:

1. My business is privately held, not publicly traded Yes No
2. The business owners, totaling greater than 50% of the business ownership, live in Northern California Yes No
3. My business is registered in California, with no corporate or national headquarters outside the state Yes No
4. My business can make independent decisions regarding the name and look of the business, as well as all business purchasing, practices, and distribution Yes No
5. My business pays all marketing, rent, and other business expenses without assistance from a corporate headquarters Yes No

As part of membership, you will be listed with other members by category on the SFLOMA web site. Would you like to have a link to SFLOMA on your web site? Yes No

If yes, would you put a SFLOMA web link on your web site? Yes No

Please indicate a principal category listing for your business (hardware, book, gift, etc.)

I am enclosing my annual membership fee of \$25 per store location. Total enclosed _____