

**NEW ENGLAND
CEMETERY ASSOCIATION
SUPPLIER MEMBERSHIP APPLICATION**

I hereby apply for a supplier membership in the New England Cemetery Association and agree to abide by the Constitution, Rules and By-Laws of the Association.

DUES: \$50.00

Name: _____ Title: _____

Company Name: _____

Company Address: _____

City: _____ State: _____ Country _____ Zip _____

Phone: (____) _____ Fax: (____) _____

Email: _____ Website: _____

As a supplier member I understand that there are certain privileges and limitations with this membership

Privileges include:

- Preferential advertising in the Membership Directory and Resource guide
- Preferential status as an exhibitor at all Association meetings.
- Participate in Association committees and will have all rights and privileges that are granted under the Association's Constitution, Rules and By – Laws.

Limitation:

- Supplier Members will not be eligible to hold any office and are not eligible to vote in any Association meetings.

Membership applications are subject to review by the Board of Directors of the Association whose decision will be final.

Signature of Applicant: _____ Date: _____

Sponsor: _____

Please submit application with dues (\$50.00) payable to: New England Cemetery Association P.O. Box 227 Milford, CT. 06460