



# International Active/Franchise Membership Application – 2018

(For Companies Providing Information Destruction Services Outside of US, Canada, Europe, Australia, New Zealand & Asia, in which case, please use appropriate NAID Chapter Membership Application Form) *NOTE: NAID INT'L MEMBERS ARE ALSO MEMBERS OF NAID GLOBAL.*

## CONTACT INFORMATION (as you want it to appear on NAID's website)

Company Name: \_\_\_\_\_ Company Representative Title: \_\_\_\_\_

Company Representative First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Physical Address (add'l): \_\_\_\_\_

Phone: \_\_\_\_\_ Toll Free: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Email: \_\_\_\_\_ Website Address: \_\_\_\_\_

If different than above, please check and indicate information below:

Billing Contact Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## COMPANY PROFILE:

Year Company Established: \_\_\_\_\_ Year Destruction Business Established: \_\_\_\_\_ # Destruction Bus. Employees: \_\_\_\_\_

Type of Operations (check all that apply):

Plant-based Info Destruction Operations: # \_\_\_\_\_ plants & # \_\_\_\_\_ collection trucks

*Please complete the Additional Locations for each plant over 1.*

Mobile Operations with # \_\_\_\_\_ shredding trucks

Destruction Services Offered (check all that apply):

Paper Shredding  Incineration  Disintegration/Micro Media Destruction

Magnetic Degaussing  Pulping  Electronic Media Destruction (Computers, Digital Eq., etc)

Hard Drive Data Sanitization  Residential Services  Product Destruction (Prototypes, Clothing)

Other Services Offered (check all that apply):

Record Storage  Recycling  Waste Disposal  Other (please list): \_\_\_\_\_

## REQUIRED DOCUMENTATION – EQUIPMENT VERIFICATION AND PROOF OF BUSINESS

(To qualify for Active Membership, you must own/lease your own equipment, or be in the process of purchasing destruction equipment, and be legally permitted to operate a business where you claim).

Equipment Manufacturer: \_\_\_\_\_

Manufacturer Rep: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

**OR**

1. Attach a copy of sales receipt or invoice that shows the make/model of the destruction equipment.

2. Attach photos of the destruction equipment.

3. List the make/model: \_\_\_\_\_

Proof of Business: Legal document/business license showing business name (from city, state or federal)

**MEMBER REFERRAL** – Did your equipment manufacturer or another NAID member refer you for joining?  No  Yes

Company: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

NAID Use Only					
Rec'd: _____	GM: _____	Bus Ver: _____	EQ Ver: _____	Com. Notice: _____	Com Apr: _____
Member#: _____	Referral: _____	QB: _____	Website: _____	MP Sent: _____	Complete: _____

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**ADDITIONAL LOCATIONS**

List any & all additional locations of the Parent Company which provides information destruction services using a separate sheet if there is more than one additional location.

Location/Branch Name: \_\_\_\_\_

Location/Branch Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Physical Address (required): \_\_\_\_\_

Phone: \_\_\_\_\_ Facsimile: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Operations (check all that apply):

Plant-based Operation: # \_\_\_\_\_ collection only trucks     Mobile Operation with # \_\_\_\_\_ shredding trucks

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**We agree with and are bound to the following:**

*(Please initial each item and sign on bottom)*

- By initialing here, I attest that I am an owner, executive officer, or manager of the company submitting this application and have full authority to represent this company and I have full knowledge of our operations.
- By initialing here, I can attest that our company, or any of its owners/officers/related affiliates
  - Have not;**  **Have** ( \_\_\_\_\_ ) been affiliated with a current or past NAID Member.
- By initialing here, I attest that this application is truthful and accurately reflects our company's operations.
- By initialing here, I attest that our company provides information destruction services on a commercial basis.
- By initialing here, I confirm that I have read, and we agree to abide by the Code of Ethics and By-laws of the National Association for Information Destruction, Inc. (*available on website at [www.naidonline.org](http://www.naidonline.org)*).
- By initialing here, I/we understand and agree that, as a NAID member, our company may only use the NAID logos and trademarks that are directly provided by NAID (*available on website at [www.naidonline.org](http://www.naidonline.org)*).
- By initialing here, I/we understand this application is for membership only and that NAID Certification is a separate application and voluntary process. I/we further understand that unless and until our company's services become NAID Certified that NAID does not endorse or approve our business standards or operations as Certified; nor will we suggest in any way that we meet NAID certification standards unless we are NAID certified.
- By initialing here, I give NAID permission to post our company and contact information on any NAID website or list in other places where it will promote our business.
- By initialing here, I give NAID permission to send the contact information of the member representative to NAID Vendor members upon their request.
- By initialing here, I give NAID permission to verify any and all information contained on this application through whatever means are necessary, including a site visit by NAID management or NAID contracted auditor.

**The information provided by me in this application is truthful and accurate. I have permission and legal authority to bind the organization to the agreements within this application.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Mail to:**  
NAID International Headquarters  
3030 N. 3<sup>rd</sup> Street., Suite 940, Phoenix, AZ 85012

**FAX to (only if paying by credit card):**  
NAID  
(480) 658-2088

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**PAYMENT INFORMATION** (NAID International Active/Franchise Ap)

**Calculation:**

**Initiation Fee:** One-Time Only (as long as membership is maintained) **\$ 300.00 USD**

**2018 Active/Franchise Membership Dues (Prorated Membership Dues)** **\$ 165.00 USD**

# \_\_\_\_\_ **Additional Locations** x **\$77.50 USD per additional location** = **\$ \_\_\_\_\_ USD**

*Disclaimer: The Membership Fees are billed on a calendar basis. The 2018 Membership Dues are being prorated for the remainder of the year and the 2019 Membership Dues will be made payable in January*

**TOTAL REMITTANCE:** \$ \_\_\_\_\_ **USD**

**Payment is by:**

AMEX  Discover  MC/Visa # \_\_\_\_\_ Expires (mo/yr): \_\_\_\_ / \_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_ CVV# \_\_\_\_\_

**Cheques Are Not Accepted**

*"The National Association for Information Destruction is a 501(c) 6 organization. According to the IRS, dues may be deductible as a business expense for U.S. members but not as a charitable contribution. Please check with your tax adviser."*