



Membership Application

200 South Meridian Street, Suite 350 • Indianapolis, Indiana 46225 • 317 684-7580 • 888 838-IABR • fax 317 673-4210

The mission of the INDIANA ASSOCIATION OF BEVERAGE RETAILERS is to promote, protect, improve, and support the interests of the package store industry in Indiana through education, government relations, and member services.

Please Print

Business Name _____
(DBA Name) (Corp. Name)

Name of Applicant _____ Title _____

Address _____

City _____ County _____ State _____ Zip _____

Business Phone (_____) _____ FAX Number (_____) _____

E-mail _____ Home Phone(_____) _____

Permit Number(s) _____

Combined Annual IABR & ABL Membership Investment Schedule

	Units	
Under \$100,000	\$235.00 x _____ = _____	
100,000 to 200,000	325.00 x _____ = _____	
200,000 to 400,000	405.00 x _____ = _____	
400,000 to 700,000	585.00 x _____ = _____	
700,000 to 1,000,000	705.00 x _____ = _____	
Over 1,000,000	900.00 x _____ = _____	
	Total Units _____	Total Dues \$ _____

Multi-unit companies' dues are based on the sum of each individual unit's dues according to sales volume. Multi-unit companies shall have one vote per each unit covered by the membership. All stores with common ownership must be included. Should you decline to base dues on dollar volume, you may pay \$500 per store.

The fiscal year runs from October 1st through September 30th. All memberships expire for billing purposes either October 1st or April 1st of the year following membership enrollment. All memberships are automatically renewable, but if no payment is made, the membership cancellation takes place three months following the billing date. Renewals received during the three to twelve month period following the nonpayment are credited back to the original billing date.

Method of Payment

Check  

Account Number _____

Expiration Date _____

Cardholder's Signature _____

Annual Dues Investment \$ _____

As an added benefit members of IABR receive membership in the American Beverage Licensees (ABL) and representation on federal issues such as excise tax rates. ABL dues are \$25 per unit.

I hereby apply for active membership in the INDIANA ASSOCIATION OF BEVERAGE RETAILERS, and agree to abide by the By-Laws of the Association. I agree that this membership shall continue from year to year, unless terminated for cause.

Applicant's Signature _____ Date _____

Recommended by _____

By becoming a member you are authorizing us to send information on services and products by email, or phone and fax under U.S.C. 47sec.227. 75% of dues payments by members are deductible as an ordinary and necessary business expense for federal income tax purposes. Contributions, gifts and dues are not deductible as charitable contributions.