



CORPORATE ASSOCIATE MEMBERSHIP APPLICATION

Corporate Associate Member Is an entity or individual working in a field or providing a service that is associated with the application of body piercing. Examples of Corporate Associate Members are jewelry manufacturers, medical suppliers, insurers, educators, etc.

Corporate Associate Membership dues are \$200.00 (\$200.00 annual renewal). Dues are billed upon acceptance. DO NOT SEND them with your application.

For the current address for application processing, the Secretary can be reached at secretary@safepiercing.org, or call 1-888-888-1APP

PLEASE ALLOW 6-8 WEEKS FOR PROCESSING

04/05

Name of Company _____

Name of Contact _____

Company Address _____

City, State, Zip _____

Phone _____ Fax _____

Website _____

Email _____

Yes No Would you like your email address to appear on our website?

Please include the following documentation:

- A completed copy of this application form.
- Letter of intent, requesting membership and outlining in what way your company is relevant to body piercing.
- Business documentation: business license or other items verifying the company or group as an entity.
- Signed logo usage agreement. (The term 'license' in this agreement refers only to the use of the logo, your company may not claim to be 'APP licensed').

THE FOLLOWING CRITERIA MUST BE INCLUDED FOR WHOLESALE JEWELRY DISTRIBUTORS:

- Catalog or brochure.
- Mill specs for all gauges of steel and Titanium wire, balls, and bar.
- MSDS sheets for Gold and Niobium.
- Samples, disassembled, of the following:
 - 3 14 gauge ½” steel captive bead rings w/ steel balls
 - 3 14 gauge ½” titanium captive bead rings w/titanium balls
 - 3 12 gauge steel barbells
 - 3 12 gauge titanium barbells

Independent metal testing may be conducted by the APP at any time to verify provided documentation. This will be at your expense, approximate cost is \$300- \$500.

THE FOLLOWING CRITERIA MUST BE INCLUDED FOR AFTERCARE PRODUCT DISTRIBUTORS:

- MSDS sheets for all aftercare products being distributed.

Results of extensive clinical studies performed by one or more independent laboratory or other documentation may be requested.

THE FOLLOWING CRITERIA MUST BE INCLUDED FOR EDUCATORS:

- Qualifications of the class instructor(s).
- A copy of the class curriculum.
- Copies of all handouts, workbooks or materials given to class participants.
- A voided copy of any certificates or awards given upon course completion*.

*Certificates distributed for piercer training must state the number of hours or days the course took to complete, and that completion of the course does not claim that the participant is certified or licensed to pierce.

OTHER INDUSTRY SPECIFIC CRITERIA MAY BE REQUESTED ON AN INDIVIDUAL BASIS.

Signature of Applicant _____ Date _____

By my signature above I certify that I have read and I agree to the terms of this application.