



**AFIA** | Association of  
Floral Importers  
of America

## MEMBERSHIP APPLICATION - AFFILIATE

**Company Name:**

**Address:**

**Telephone:**

**Web Site:**

**Contact Person:**

**Name:**

**Title:**

**Phone:**

**E-mail address:**

**Date of Incorporation:**

**State of Incorporation:**

**Number of employees at all Company operations:**

**Office locations:**

**Type of Goods/Services provided to the fresh cut flower importing industry:**

**I hereby certify that the information given to the Association of Floral Importers of America in this membership application is true and accurate.**

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

**Date:**

**Title:**