



USCC Membership Application

Member Information

Member Company/Organization: _____
Mailing Address/PO Box/RR _____
Street Address: _____
City: _____ State/Province: _____ Postal Code _____ Country _____
Phone: _____ Fax _____ Country Code: _____
Company/Organization Web Address: _____

Please check your Membership Level.

<input type="checkbox"/> Benefactor	Support of the composting industry at the highest level. Please contact the USCC for more information	\$10,000
<input type="checkbox"/> Corporate Sustaining	Support of the composting industry at a higher level. Please contact the USCC for more information	\$5,000
<input type="checkbox"/> Corporate	Composters, Green Haulers, Equipment Manufacturers, and other companies with an annual gross income of \$5 million or more	\$2,500
<input type="checkbox"/> Large Business	Composters, Green Haulers, Equipment Manufacturers, and other companies with an annual gross income of \$2.5 million to \$5 million	\$1,000
<input type="checkbox"/> Medium Business	Composters, Green Haulers, Equipment Manufacturers, and other companies with an annual gross income of \$1 million to \$2.5 million	\$500
<input type="checkbox"/> Small Business	Composters, Green Haulers, Equipment Manufacturers, and other companies with an annual gross income less than \$1 million	\$250
<input type="checkbox"/> Large Government	Government agencies that represent populations of 1 million or more	\$500
<input type="checkbox"/> Government	Government agencies that represent populations up to 1 million	\$250
<input type="checkbox"/> University	Academic institution or unit thereof (colleges, departments)	\$250
<input type="checkbox"/> Non-Profits	Non-profit organizations with a 501(c) status	\$250
<input type="checkbox"/> Farm composter	Farmers that use their residuals to produce compost for their own use	\$200
<input type="checkbox"/> Individual	Individuals engaged in the composting or related industries	\$100
<input type="checkbox"/> Students (non-voting)	Accepted with written proof. Must be enrolled at least half-time	\$25
<input type="checkbox"/> Friend of Composting (non-voting)	Gardeners, home composters, and others who wish to support composting and compost use.	\$25

Please select your category. Please indicate ONLY one.

- | | |
|--|--|
| <input type="checkbox"/> Compost or Mulch Producer | <input type="checkbox"/> Equipment Manufacturer / Product Supplier |
| <input type="checkbox"/> Hauler | <input type="checkbox"/> Testing Laboratory |
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Non-Profit Organization |
| <input type="checkbox"/> Academic and Research | <input type="checkbox"/> Compost Industry Supporter |
| <input type="checkbox"/> Industry Publication | <input type="checkbox"/> Individual |
| <input type="checkbox"/> Public Agency | <input type="checkbox"/> Other _____ |

If you checked Equipment Manufacturer / Product Supplier, please check ALL that apply

- | | | |
|--|--|---|
| <u>Equipment</u> | <u>Equipment (con't)</u> | <u>Products and Services</u> |
| <input type="checkbox"/> Aeration and Odor Control | <input type="checkbox"/> Grinding/shredding | <input type="checkbox"/> Catalysts/inoculants |
| <input type="checkbox"/> Air separation | <input type="checkbox"/> Materials Handling | <input type="checkbox"/> Compost Covers |
| <input type="checkbox"/> Anaerobic Digestion | <input type="checkbox"/> Mixing | <input type="checkbox"/> Compostables |
| <input type="checkbox"/> Bagging | <input type="checkbox"/> Monitoring | <input type="checkbox"/> Collection containers |
| <input type="checkbox"/> Biosolids management | <input type="checkbox"/> Replacement parts | <input type="checkbox"/> Erosion control |
| <input type="checkbox"/> Compost application | <input type="checkbox"/> Process control | <input type="checkbox"/> Leasing and financing |
| <input type="checkbox"/> Compost tea-making | <input type="checkbox"/> Rolling stock: payloaders, dozers, trucks | <input type="checkbox"/> Netting/Litter control |
| <input type="checkbox"/> Home compost bins | <input type="checkbox"/> Screening | <input type="checkbox"/> Odor control |
| <input type="checkbox"/> Composting systems | <input type="checkbox"/> Structures | |
| <input type="checkbox"/> Debugging | <input type="checkbox"/> Turners | |
| <input type="checkbox"/> Dust control | | OTHER _____ |

Description: Please describe your company or your organization (not to exceed 75 words)

You will receive an email with instructions for adding a logo to your Directory listing

Primary Contact information

Prefix _____ First Name _____ Middle _____ Last Name _____ Suffix _____
Title: _____
Phone: _____ Fax: _____
E-mail: _____
Address (if different) _____
City: _____ State/Province: _____ Zip Code: _____
Country: _____ Country Code: _____

Additional contacts can be added to your profile after you receive your username and password

DUES AND PAYMENT INFORMATION

Annual Dues based on level selected \$ _____

Directory of Equipment, Products and Services

Get listed! Our directory of composting-related equipment, products and services will allow customers to find you when they need you. A Directory listing is included at the \$2500 level and up. For all other members, an annual listing is only \$200. A Directory listing includes contact information, description, hotlink to your website, and logo.

Check here if you wish to be included in the Directory (add \$200 unless at Corporate level or higher) \$ _____

Focused contributions

Put your resources to work where you want them! Place a checkmark next to the category of focused contribution you want, indicate the amount of your contribution, and add that to the total payment below.

- Legislative Advocacy \$ _____
- National Compost Marketing Campaign \$ _____
- International Compost Awareness Week \$ _____
- Professional Education and Certification \$ _____
- Composting Council Research & Education Foundation \$ _____

Total Membership, Directory and Focused Contributions \$ _____

Payment Information: USCC Federal ID#: 52-1667506

Payment by check, money order, or credit card is acceptable. Please make checks payable to "US Composting Council" and mail to the above address.

Amount: \$ _____ (Payment in US dollars only.)

Check or money order enclosed

Credit Card: Master Card Visa American Express

Card number: _____ Exp: _____

Name on Card: _____

Signature: _____

(For Credit card payments, Mail to above address or Fax completed form to: 631-737-4939)