



## **Section A: About Your Company**

FIRM NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ YEAR FOUNDED: \_\_\_\_\_

STREET: \_\_\_\_\_ P. O. BOX NO: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

## **SECTION B: MEMBERSHIP TYPE**

MEMBERSHIP	NAME	% OF OWNERSHIP	MEMBERSHIP FEE
Voting Designated Member	_____	_____	\$150.00
Affiliate (Non Voting)	_____	_____	
Affiliate (Non-Voting)	_____	_____	
Wholesaler/Supplier (Non-Voting)	_____	_____	\$125.00
Additional Affiliate Seats (Non-Voting)	_____	_____	\$75.00 each

### 1. For monument Designs:

\_\_\_\_\_ Service Done In-House      \_\_\_\_\_ I Use an Outside Source

### 2. For Manufacturing (lettering/carving of new memorials):

\_\_\_\_\_ Service Done In-House      \_\_\_\_\_ I Use an Outside Source

### 3. For setting/installs:

\_\_\_\_\_ Service Done In-House      \_\_\_\_\_ I Use an Outside Source

### 4. For cemetery lettering/services for your company?

\_\_\_\_\_ Service Done In-House      \_\_\_\_\_ I Use an Outside Source

## **SECTION C: WHAT TO SUBMIT**

### **SPECIAL NOTE:**

PLEASE SUBMIT THE FOLLOWING ITEMS AND PHOTOGRAPHS WITH THIS APPLICATION. THIS IS A REQUIREMENT FOR ALL APPLICANTS.

- AT LEAST FIVE (5) PHOTOGRAPHS OF MEMORIALS RECENTLY SUPPLIED BY YOUR COMPANY WITH CREDIT GIVEN TO THE SUPPLIER

### **DISPLAY TYPE:**

Pictures of store front and display can be emailed to: [info@mbgl.org](mailto:info@mbgl.org)

OUTDOOR DISPLAY

INDOOR DISPLAY

BOTH

## **SECTION D: ORGANIZATION PARTICIPATION:**

1. Committee positions I am interested in:

\_\_\_\_\_ Advocacy

\_\_\_\_\_ Education

\_\_\_\_\_ Event Planning

2. How would you like to benefit by being a member of MBGL?

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Applicant \_\_\_\_\_

Your signature \_\_\_\_\_

Please email to:  
[info@mbgl.org](mailto:info@mbgl.org)

**Please mail check to:**  
14600 Brookpark Rd.  
Brookpark, OH 44135  
Attn. Mike Milano (Treasurer)

**Or Pay Online at:**  
<https://pay.mbgl.org/>

