APPLICATION FOR RETAIL MEMBERSHIP
LDS BOOKSELLERS ASSOCIATION

PLEASE COMPLETE THE FOLLOWING: (Type or print and put N/A if the question does not apply.) Submit with check for $100 dues.

Name of Business/ Company/ Store: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____)_____ (800) or (888) Number: (_____)_____

Fax: (___)_____ E-mail: _____

Web Page: _____

Store address if different than the one above: _____

City: _____ State: _____ Zip Code: _____

Owner's Name: _____

Manager's Name: _____

Vendors Please Contact: _____

Home Address of Owner: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____

What type and size store do you operate? In-home _____; Store front _____;

Approximate square footage of selling space_____

Do you have more than one location? _____

Other than yourself, how many employees do you have? Full time _____; Part time _____

How long have you been in business? _____ (specify years or months)

Do you sell exclusively LDS products? Yes _____ No _____ Do you have an Internet presence? _____

Office Use

Voting Member

Associate Member

Mailings

Publication

Mailed

Received

Dues

Entered

Mailed Bylaws

Certificate

Publication

Convention Info

All of the following questions are based on the definition of an LDS bookseller as set forth by the LDSBA Bylaws, and will be used to determine membership acceptance. Please understand that the LDSBA definition is not intended to hinder or restrict the operation of any bookselling entity, but rather is designed to ensure that membership in this association is limited to those who are most interested in the advancement of the LDS bookselling industry.

1. Is this business currently open to the public for business? Date opened _____ or anticipated date of opening _____.
2. How many hours per week is your store open? _____hours Circle days/list times store is open to the public:

   M T W T F S from _____ to _____
3. Check: Does the store own _____ or pay rent _____ on the building property in which it is located?
4. Check: Are the store workers paid employees? (Exclude owner and family members) Yes _____ No _____
5. Check: Is the store owned by a corporation? Yes _____ No _____
6. At least one of the following license numbers is required in most states. Supply the appropriate number applicable.

Please **send a photo copy** of your license.

Retail Sales # _____, Retail Vendor # _____,

Retail Business License # _____, or Official State Acknowledgment of Business Name (*Associate Member*)

7. What percentage of your inventory consists of 'LDS' product? (If not yet opened, projected percentage.) _____ %.

8. Check: Which of the following items do you stock in your store? LDS Books and Literature _____, Tapes _____, Teaching Aids _____, Gifts (porcelain, jewelry) _____, Office Supplies _____, Magazines _____, Trade Books _____ Other (please specify):

_____

9. List three current wholesale accounts in the LDS industry with which you do business.
   Name: _____ Phone: _____ Account# _____

   Name: _____ Phone: _____ Account# _____

   Name: _____ Phone:_____ Account# _____

10. Do you have a mailing list? _____ Do you advertise to your clientele on a regular basis? _____ What methods: _____

_____

STANDARDS OF CONDUCT

LDS Booksellers Association

We of the LDS Booksellers Association are committed to the development and retail distribution of products applicable and beneficial to our customers. Our membership is comprised of those who produce and distribute products suitable for the LDS market.

In order to establish a standard of conduct in our industry which, when followed will help ensure the integrity of the LDS bookselling industry and our Association, we hereby adopt the following *Standards of Conduct*:

1. Deal honestly with creditors, debtors, customers, suppliers, employees, contractors, and others with whom I conduct business.

2. Honor and fulfill my agreements and commitments to those with whom I do business.

3. Promptly pursue resolution of any dispute which I may have with any LDSBA voting or associate member.

4. Support our Association and conduct myself in a manner which will bring credit to the Association and to the industry.

5. Endeavor to treat those with whom I do business in the manner that I would have them treat me.

app. 9/06

I certify that all of the above information is correct. I have read and agree to follow the *LDSBA Standards of Conduct*, to be bound thereby in all of my dealings with others and further agree not to violate the spirit or the letter of the various State and Federal Antitrust and Fair Trade Laws.

SIGNATURE _____ Date: _____

Make checks payable to LDS Booksellers Association and mail to PO Box 27793, Salt Lake City, Utah 84127-0793