



MEMBERSHIP APPLICATION

Organization _____

Phone _____ **Fax** _____

Address _____

City _____ **State** _____ **Zip** _____

Authorized Official _____

Title _____ **Alt phone#** _____

Email _____

Other Representative _____

Alt phone# _____ **Email** _____

Other Representative _____

Alt phone# _____ **Email** _____

Membership with The Surplus Exchange is designated for Non-profit Organizations which are exempt from Federal Income Tax. Current proof of Non-profit status (501(c)3) must be on file at all times with The Surplus Exchange.

Lifetime membership with The Surplus Exchange is Fifty Dollars per organization, payable with this application. Although we will not require additional fees to maintain your membership, we do ask for occasional updated documentation of your Nonprofit status.

In order to serve your organization best, we also ask that you send us a brief summary, or Mission Statement, describing your organization.

I, the undersigned, have read and understand the above, and affirm that my organization meets the membership criteria.

Signature _____ **Date** _____