Consumer Membership Application

CONSUMER MEMBERSHIP category applies to individuals who are responsible for contracts or services (laundry and/or linen management) provided by a Textile Care Service Provider - $50 USD annually*

INDIVIDUAL INFORMATION

Mr. / Mrs. ____________________________________________ Title ____________________________________________

Email __________________________________________________________ Mobile (optional) __________________________________

What is your role in regards to the textiles used by your facility/property?

☐ Oversight of contract linen services  ☐ Infection Control  ☐ Materials Manager  ☐ Hotel Dept. Mgr. (non-laundry/housekeeping)
☐ Other (laundry service providers & vendors please use the appropriate membership application) ________________________________

COMPANY INFORMATION

Facility/Property __________________________________________________________________________________________________

Website____________________________________ Address/ PO Box ________________________________________________________

City________________________ State/Province ______________________ Postal Code ________________ Country__________________

Office______________________________           Fax_____________________________      Toll free________________________________

OPERATION DESCRIPTION /QUESTIONNAIRE (To serve you better, please complete all questions below)

Where / by whom is your laundry processed?

☐ Located on-premise     ☐ Our laundry/located nearby    ☐ Cooperative Laundry    ☐ Contracted Commercial Laundry

Describe your Facility/Property

☐ Hospital       ☐ Clinic      ☐ Rehabilitation       ☐ Hotel       ☐ Long Term Care/Assisted Living

Describe how your linen is distributed

☐ By our facility/property    ☐ Contracted to linen distribution provider    ☐ Our Contracted Laundry Company

How did you hear about us?

☐ Email      ☐ Event     ☐ Friend/Colleague    ☐ Internet Article    ☐ fresh magazine   ☐ Internet Search     ☐ Other ______________

Reason for joining? (Check all that apply)

☐ Regulations   ☐ Education  ☐ Best Practices  ☐ Industry Information Resource  ☐ Other ______________

BILLING INFORMATION (Payment must be remitted in U.S. funds only)

☐ Wire Transfer for non-US companies only (contact info@ALMnet.org for details)  
☐ Check (payable to Association for Linen Management or ALM)
☐ Credit Card – I authorize a charge of $50.00* USD to ☐ MasterCard  ☐ Visa  ☐ AMEX  ☐ Discover  as indicated below

Card Number                                                                                               Exp. Date                                               CVV | CV2 Number
__________________________________________________________________________________________________________
__________________________________________________________________________________________________________
Name on Card                                                                                              Authorized Signature

ALM does NOT accept credit card payment via email. Please fax or mail.

*ALM reserves the right to place you in the correct category and bill for the remaining dues, if applicable. Dues are not deductible as a charitable contribution for U.S. federal income tax purposes, but may be partially deducted as a business expense. No ($0) dues are allocable to lobby activities. Dues are non-refundable.