

# MEMBERSHIP APPLICATION - RETAIL FIRM



Firm Name: \_\_\_\_\_ Corporate Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Firm Location:  Business District  Residential Area  Shopping Center

E-mail: \_\_\_\_\_ Web Address: \_\_\_\_\_

Name of Sole Owner(s): \_\_\_\_\_ Active:  Yes  No

Name of Principals/Officers:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Active:  Yes  No

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Active:  Yes  No

How did you hear about the American Gem Society? \_\_\_\_\_

Are you a client of AGS Laboratories?  Yes  No

How long has the firm been operating under the current ownership? \_\_\_\_\_

Year Established: \_\_\_\_\_ Number of Employees: F/T: \_\_\_\_\_ P/T: \_\_\_\_\_

Do you own any other jewelry stores in the same city or other cities?  Yes  No

- If yes, list additional location addresses and number of employees on a separate sheet.

Do you own a wholesale business?  Yes  No Percentage: \_\_\_\_\_

Do you operate a wholesale business out of your retail operation?  Yes  No Percentage: \_\_\_\_\_

Do you operate a loan or pawn business?  Yes  No Percentage: \_\_\_\_\_

Is there any other business outside of jewelry connected with your firm?  Yes  No

- If yes, please explain on a separate sheet.

Does your firm possess a binocular gem microscope?  Yes  No

- I understand that if "No" has been indicated above, our firm will be required to purchase a binocular gem microscope upon election.

**Initials of Firm Principal:** \_\_\_\_\_

## American Gem Society' Titleholder Application

In order to best protect the consumer through knowledge and ethics, and maintain membership of the firm, each American Gem Society Retail Firm member must have at least one individual, either the principal or a full-time employee, satisfy the requirements for the Registered Jeweler (RJ) title. The individual must have completed, or be enrolled in, the Accredited Jewelry Professional (AJP) program and the 5-day Diamond Grading Laboratory or 5-day Gem Identification Laboratory through GIA, or equivalent education through Gem-A or other approved institutions. Following the prerequisite education, the individual must successfully complete the AGS Way course to earn the RJ title. This individual has **two years from the date of election** to complete the required studies to receive their title. Please complete the following for the full-time employee who will become an American Gem Society titleholder:

Applicant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please list the gemological courses completed, and please be sure to include the dates. If these were GIA courses, please provide student number:

GIA Student #: \_\_\_\_\_

Courses Completed: \_\_\_\_\_

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Please complete the following sections and/or provide the necessary documentation in order to complete your membership application:

**Merchandise:** Indicate the percentage of sales to total business volume.

Diamonds and precious gemstones.....Approx.____%	China and crystal.....Approx.____%
(including mounted or loose gemstones and cultured pearl jewelry)	Repairing and engraving.....Approx.____%
Karat gold jewelry.....Approx.____%	Appraisals.....Approx.____%
Costume and fashion jewelry.....Approx.____%	All other departments.....Approx.____%
Watches.....Approx.____%	(if greater than 10%, explain on a separate sheet)
Silver, silver-plate, stainless steel.....Approx.____%	

**Advertising:** Indicate the percentage of advertising for each medium and provide samples.

Newspaper.....Approx.____%	Television.....Approx.____%
Direct Mail.....Approx.____%	Billboards.....Approx.____%
Radio.....Approx.____%	Digital.....Approx.____%

**Photos:** Photographs of the interior and exterior of your firm (and branches if applicable), and a photo of your binocular gem microscope (if you possess one).

**Appraisal:** Sample of a completed appraisal, if applicable.

**Letter Describing Your Business:** Please write one to two paragraphs on your company stationary describing your business policies and standards, and why you wish to join the American Gem Society.

**References:** List the American Gem Society Supplier Firm members you do the most business with.

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**Letters of Recommendation:** Retail Firm members must submit three (3) letters of recommendation from active American Gem Society members with at least one (1) letter from a Retail Firm member. The Membership Department can reach out to the references listed above to assist in collecting the letters of recommendation.

**Consumer Protection:** Has your firm ever had a case before the Better Business Bureau, Federal Trade Commission, Jewelers Vigilance Committee or other such municipal, county or state consumer protection agencies?  Yes  No  
• If yes, please submit information on a separate sheet.

**Jewelers Board of Trade (JBT) Report:** I understand that the American Gem Society can request a Jewelers Board of Trade (JBT) report about our firm. If not listed with JBT, a credit report and/or credit references will be provided by our firm. Members of the American Gem Society must comply with United Nations Resolutions to purchase diamonds from legitimate sources not involved in funding conflict.

**Initials of Firm Principal:** \_\_\_\_\_

**Total Gross Business Volume:** For all locations during the last fiscal year (12 months) \_\_\_\_\_ (for dues billing purposes only).

**Accountant or Firm Principal Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I hereby certify that the above statements and information are complete, true and accurate and understand that the correctness of the accuracy of the above statements and information and verification of the same are to be construed as a condition of precedent to membership. I authorize an investigation of the credit report of the above firm and of the above statements and information and authorize the release of information concerning damages or liabilities which might result from issuance of a credit report or from the verification or attempted verification of the above information and statements. If elected to membership, I agree to abide by the Articles of Incorporation, Standards and Bylaws of the American Gem Society.

**Firm Principal Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I give the American Gem Society permission to share the email address on this application with other American Gem Society members.