

RETAILER APPLICATION



BUSINESS INFORMATION

DBA _____
Address _____
City _____ State _____ Zip _____
Web Address _____ Business Phone _____
Permit Number(s) _____

INDIVIDUAL INFORMATION

Primary Contact _____ Title _____
Email _____ Mobile Phone _____
Owner/Operator Name _____
Corporation Name/Property Management Co. _____
Corporate Address _____
Are You a Member of a Co Op? If so, please name: _____

ANNUAL DUES

\$25 of your dues represents an added benefit of membership in the American Beverage Licensees (ABL) and representation on federal issues. Multi-unit companies' dues are based on the sum of each individual unit's dues according to sales volume. Multi-unit companies shall have one vote per each unit covered by the membership. All stores with common ownership must be included.

Under \$500,000.....\$485 x **Units** _____ Over \$500,000.....\$905 x **Units** _____

The fiscal year runs from Jan. 1st through Dec. 31st. All memberships expire for billing purposes either April 1st or Oct.1st of the year following membership enrollment. All memberships are automatically renewable, but if no payment is made, the membership cancellation takes place three months following the billing date. Renewals received during the three to twelve month period following the nonpayment are credited back to the original billing date.

Payment Method Mail to IABR, 200 S. Meridian St., Suite #350, Indianapolis, IN 46225
or email to Tom Johnson at tjohnson@tammcapitalgroup.com

Mastercard Visa Amex Discover Check Enclosed

Dues Amount: _____

Card No. _____ CID No. _____ Exp. Date _____

Name on Card _____

Signature _____

INDIANA ASSOCIATION OF BEVERAGE RETAILERS

200 S. Meridian St., Suite #350 | Indianapolis, IN 46225 | (317) 684 -7580 | www.InBevRetailers.com