

CONVENIENCE MARKETERS ASSOCIATION - ENROLLMENT FORM INFORMATION



Applicant Name:	Applicant Business Name:	Applicant Title:
Main Contact Name:	Phone	Main Contact Email Address:
Mailing Address:	City:	State / Zip:

Store Name	Federal Tax ID	Grocery Distributor Name	Grocery Distributor Acct #	Grocery Distributor Contact Name	Grocery Distributor Phone	Grocery Distributor Email

*Sam's Club purchases do not qualify

Do you belong to another Buying Group? YES NO If yes list Group(s) _____

Are you Affiliated with a Franchise? YES NO If yes, list Franchise _____

ACH for Rebate Deposits:

Bank Name _____
 Routing # _____
 Account# _____

Retailer Member Cost: No Joining, Monthly, Annual, Or Out-of-Pocket Fees

Quarterly Administrative Fee (Taken Against Quarterly Rebate)

Rebate \$500 < Quarter	25%
Rebates \$501 ≥ \$1,000 per Quarter	20%
Rebates \$1,001 ≤ \$2,000 per Quarter	15%
Rebates \$2,001+ > per Quarter	10%

I agree and certify that I am the legal owner or authorized signer for this business and that all the information provided is true and accurate. I am legally capable of entering into this agreement and I agree to all terms and conditions as a Retailer Member of the Convenience Marketers Association. I certify all orders, reports and data including but not limited to records of sales or purchases, which I or my representatives will provide to CMA, to be true and accurate to the best of my knowledge. I authorize CMA to utilize said data for the sole purposes of negotiating and redeeming on my behalf, any and all CMA programs and promotions for each location I enroll. While enrolled with CMA, I authorize CMA to administer the tracking and payment for all CMA manufacturer programs in excess of my supplier and distributor programs. I acknowledge that any/all user permissions for programs, technology, process, or information at www.getcma.com are proprietary and provided to me and my authorized representatives on a confidential basis, solely for internal use. As such, I certify that I and my representatives will not replicate, disseminate, share, or transmit in any form, without prior written consent by Convenience Marketers Association.

Check here to indicate that you have read and agree to the CMA Terms and Conditions

Signature of Applicant:	Date:
Printed Name:	Company Name: