**Affiliate Program**

The IBWA Affiliate Program is for individuals or companies interested in establishing a company to bottle or package drinking water. The category is intended solely for the purpose of assisting **potential bottlers**, allowing them a means of gathering information in preparation for later transition to Bottler membership. Companies are permitted to remain in the Program for a maximum of **two years**, at which time they must transfer to one of the other IBWA member types.

Once a company in the Affiliate Program begins to produce bottled water, they must transfer to either the IBWA Candidate Bottler Program or Bottler member type to continue the membership.

Total payment for new affiliates is due at the time of application.

**Affiliate Program Dues**

|  |  |
| --- | --- |
| ❑ First-time ❑ Renewing affiliate | **Annual Dues: $1,631.00** |

|  |  |  |
| --- | --- | --- |
| * I am now in production and should be transferred to the Bottler Membership or Candidate Bottler Program. Please send me: |  | Bottler Membership Dues Form |
|  |  | Candidate Bottler Program Form |

**I. Contact Information**

|  |  |
| --- | --- |
| **Company Name** |  |
|  |  |

|  |  |
| --- | --- |
| Address |  |
|  |  |

|  |  |
| --- | --- |
| City/State/Zip or Postal Code |  |

|  |  |
| --- | --- |
| Country |  |

|  |  |
| --- | --- |
| Website |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Telephone |  | Fax |  |

|  |  |
| --- | --- |
| Customer/Consumer Information Number |  |

|  |  |
| --- | --- |
| Number of Employees |  |

**Company Contacts**

|  |  |
| --- | --- |
| **Primary Representative** |  |

*(Primary contact person to receive all communications from IBWA, including renewal notices and industry alerts)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title |  | | | | |
| Direct Dial Number/Extension | | |  | Direct Fax |  |
| Email Address | |  | | | |

|  |  |
| --- | --- |
| **Alternate Representative** |  |

*(Additional company employee to receive communications from IBWA)*

|  |  |
| --- | --- |
| Title |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Direct Dial Number/Extension |  | Direct Fax |  |

|  |  |
| --- | --- |
| Email Address |  |

*Please find a separate sheet on page 4 if you would like to designate additional representatives to receive information and IBWA publications*

**II. IBWA POLITICAL ACTION COMMITTEE Authorization to Solicit**

* We have read the IBWA “Why a PAC?” flyer and are enclosing a signed IBWA PAC Authorization to Solicit form for our company. *We understand that giving IBWA the Authorization to Solicit does not require any of our employees to make a contribution to the IBWA PAC.*
* “Become and IBWA PAC Program Sponsor! Your voluntary donation to IBWA will help fund PAC administration activities and allow every personal contribution to the IBWA PAC to go toward supporting the election or reelection of candidates who support the bottled water industry.”

|  |  |
| --- | --- |
| **Send your completed dues form along with payment to the IBWA Membership Department:** | |
| **Postal Mail**  **IBWA**  **1800 Diagonal Rd, Suite 600 – PMB #1125**  **Alexandria, VA 22314** | **Email**  **cbass@bottledwater.org** |
| **For questions, contact the IBWA Membership Department at 703-647-4615 or cbass@bottledwater.org.** | |
| **NOTE: dues are payable on January 1 of each year** | |

**III. Payment Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Annual Dues | | | **$1,631.00** | |
| 1. Voluntary Contribution to the Drinking Water Research Foundation (DWRF) | | | | $ |
| 1. Discount Description: |  | Discount Amount: | |  |
| 1. **Total amount enclosed** | | | | $ |

*(If paying by check, make check payable to IBWA; U.S. funds only)*

**Payment Type – Select One**

**(Due to rising processing costs, we would greatly appreciate your payment by check, when possible. We cannot accept credit card payments over $8,000.00.)**

|  |  |  |
| --- | --- | --- |
| Check enclosed | |  |
| Credit card |  | |

**IBWA currently accepts the following credit cards for payment of dues:**

❑ MasterCard ❑ Visa ❑ American Express ❑ Discover

|  |  |
| --- | --- |
| Amount to be charged | $ |

|  |  |
| --- | --- |
| Card Number |  |

|  |  |
| --- | --- |
| Expiration Date |  |
| Security Code |  |

|  |  |
| --- | --- |
| Cardholder’s Signature |  |

|  |  |
| --- | --- |
| Cardholder’s Name *(please print)* |  |

**General Information**

* Dues paid to IBWA are deductible as an ordinary business expense but NOT deductible as “charitable” contributions for 2024 Federal Income Tax purposes. The portion of dues payments used for lobbying expenses by the association is not deductible for 2024 Federal Income Tax purposes. **The nondeductible portion of your 2024 dues is 31.51%.** Contributions to the Drinking Water Research Foundation (DWRF) are deductible as charitable donations for Federal Income Tax purposes.
* **IBWA tax ID #25-1124210**
* $25 of your dues investment is applied towards your yearly subscription to the *Bottled Water Reporter*

Payment of the above fees indicates agreement by the company to abide by the IBWA Bylaws and other rules. All sales and other information provided will be kept in the strictest confidence.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature |  | | Date |  |
| **IBWA Sponsoring Member** *(if referred by a current IBWA member)* | |  | | |

If there are additional employees that you would like to receive IBWA News Splash, the Bottled Water Reporter magazine, and other announcements, please provide their contact information in the spaces available below. There is no limit to the number of additional contacts that can be provided to IBWA, so feel free to attach additional sheets of contact information, if needed.

All additional contacts do not have to be located at the same address. For more Additional Contact sheets, go to: <http://www.bottledwater.org/membership/dues-renewal>, or make a copy of this page.

**Additional Company Contacts**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

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| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | |
| Title |  | | | | | |
| Direct Dial Number/Extension | | | |  | Direct Fax |  | |
| Email Address | | |  | | | |