



US Composting Council

1 Comac Loop, Suite 14B1
Ronkonkoma, NY 11779
631-737-4931 fax: 631-737-4939
Email: uscc@compostingcouncil.org

MEMBERSHIP APPLICATION

Contact Information:

Member Company/Organization: _____
Contact Person: _____ Position: _____
Street Address: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Province: _____ Country Code: _____
Country: _____
Phone: _____ Fax: _____
E-mail: _____
Company/Organization Web Address: _____

Directory and Website Description:

Please identify the services provided by you, your company, or your organization (not to exceed 75 words):
This information will appear in the USCC annual directory and the USCC website.
Please email these descriptions to uscc@compostingcouncil.org

Category in Directory:

Please indicate ONLY one category:

- | | |
|---------------------------|-------------------------------------------|
| Compost or Mulch Producer | Equipment Manufacturer / Product Supplier |
| Consultant | Testing Laboratory |
| Academic and Research | Non-Profit Organization |
| Industry Publication | Individual |
| Public Agency | Other _____ |

Membership Dues Levels:

Benefactor	\$10,000	Support of the composting industry at a higher level
Corporate Sustaining	\$5,000	Support of the composting industry at a higher level
Corporate	\$2,500	Companies with an annual gross income of \$5 million or more
Large Business	\$1,000	Companies with an annual gross income of \$2.5 million or more
Medium Business	\$500	Companies with an annual gross income of \$1 million to \$2.5 million
Large Government	\$500	Government agencies that represent populations of 1 million or more
Small Business	\$250	Companies with an annual gross income less than \$1 million
Government	\$250	Government agencies that represent populations up to 1 million
University	\$250	Academic institution or unit thereof (colleges, departments)
Non-Profits	\$250	Non-profit organizations with a 501 (c) status
Individual (non-voting)	\$100	Private individuals not employed in the composting industry
Students (non-voting)	\$50	Students accepted with written proof

Storefront Levels:
If you would like to include a storefront with your membership, please read the following information.

- **Level 1** is similar to a business card and contains the company name, contact person, address, telephone number, e-mail address and web site. The web site and e-mail address will not be active links. This level is a membership benefit for \$500 memberships and above.
- **Level 2** is the same as Level 1, but includes an active web site and e-mail links. This level is a membership benefit for \$1,000 memberships and above.
- **Level 3** is the same as Level 2, but also includes a space for the company/organizations logo. This level is a membership benefit for \$10,000 memberships.
- **Level 1, 2, & 3** Storefronts can be purchased as described below.

Cost of Storefront based on Membership Level		
\$250 Membership Level (This level membership does not include a Storefront)		Total Cost
Storefront Level 1	Add an additional \$250 to membership	\$500
Storefront Level 2	Add an additional \$500 to membership	\$750
Storefront Level 3	Add an additional \$750 to membership	\$1000
\$500 Membership Level		Total Cost
Storefront Level 1	Part of Membership Fee	\$500
Storefront Level 2	Add an additional \$250 to membership	\$750
Storefront Level 3	Add an additional \$500 to membership	\$1000
\$1,000 up to \$10,000 Membership Level		
Storefront Level 1	Part of Membership Fee	
Storefront Level 2	Part of Membership Fee	
Storefront Level 3	Add an additional \$250 to membership	
\$10,000 Level receives the Level 3 Storefront as part of their membership		

Total Storefront and Membership payment \$ _____

Payment Information: USCC Federal ID#: 52-1667506

Payment by check, money order, or credit card is acceptable. Please make checks payable to "US Composting Council" and mail to the above address.

Amount: \$ _____ (Payment in US dollars only.)

Check or money order enclosed

Credit Card: Master Card Visa American Express

Card number: _____ Exp: _____

Name on Card: _____

Signature: _____

(For Credit card payments, Fax completed form to: 631-737-4939)