

APPLICATION FOR VOTING MEMBERSHIP



PLEASE PRINT OR TYPE AND ENTER INFORMATION **EXACTLY** AS IT SHOULD APPEAR IN IOMA LISTINGS

The undersigned — a person, firm, or corporation engaged in the **MANUFACTURE AND SALE OF INDUSTRIAL AND/OR MEDICAL GASES** as defined in Article 3, Section 3.2, of the IOMA By-Laws (reproduced on page 2 of this document) — hereby applies for **VOTING MEMBERSHIP** in IOMA, and if accepted into membership, agrees to be bound by the Articles of Incorporation and By-Laws of the Association, and to pay when due all dues and other obligations to the Association.

COMPANY _____

ADDRESS _____

PHONE _____ **FAX** _____

EMAIL _____ **WEBSITE** _____

THE APPLICANT IS A: Corporation Partnership Proprietorship Other (PLEASE SPECIFY): _____

CEO/PRESIDENT _____ **VICE PRESIDENT** _____

SECRETARY _____ **TREASURER** _____

1 Year in which your company began manufacturing industrial/medical gases: _____

2 Territory or primary area covered by your sales or operations:

- Multinational North & South America Europe, Middle East & Africa Asia Pacific

3 Please indicate the gases which you manufacture and sell:

- Oxygen Acetylene Hydrogen Nitrogen
 Carbon Dioxide Helium Argon Nitrous Oxide
 Research/Specialty Gases Other(s) (Please specify) _____

4 Number of employees engaged in the manufacture and sale of industrial/medical gases: _____

5 Approximate annual sales of gases (in U.S. dollars): _____ \$ _____

6 REPRESENTATIVE(S): Each company must designate at least one (1) executive to be the company's official IOMA representative:

NAME _____ **NAME** _____

TITLE _____ **TITLE** _____

E-MAIL _____ **E-MAIL** _____

7 AUTHORIZATION: This application for IOMA Membership is hereby authorized by the following executive of the applicant company:

NAME _____ **SIGNATURE** _____

TITLE _____ **DATE OF APPLICATION** _____

8 SPONSORSHIP: Applications may be SPONSORED by a company which holds Voting Membership in IOMA and may be ENDORSED by an IOMA Director or Officer. Such sponsorship is optional, but does facilitate the approval process.

■ **SPONSOR:** The undersigned, a Voting Member of IOMA, has reviewed the membership qualifications stated in the IOMA By-Laws (reproduced on page 2 of this application form) and is pleased to sponsor the applicant for VOTING Membership.

SPONSORING COMPANY _____

IOMA REP. NAME _____

TITLE _____

SIGNATURE _____ **DATE** _____

■ **ENDORSEMENT:** The undersigned IOMA Director or Officer has reviewed the membership qualifications stated in the IOMA By-Laws (reproduced on page 2 of this application form) and is pleased to endorse the applicant for VOTING Membership.

NAME (PLEASE PRINT) _____

IOMA POSITION/TITLE _____

SIGNATURE _____ **DATE** _____

22F03-V (REV. 1/14)

■ **Application Deadline:** Applications **must** be received by the IOMA office at least **six weeks prior** to an IOMA Board of Directors meeting in order to be considered during the Board meeting. The Board meets twice annually, in the Spring and during the Fall Annual Meeting. Please contact the IOMA office for specific dates.

■ **Dues:** Membership dues payment must be submitted with this application form. If for any reason your application is not accepted, we will issue a refund promptly.

■ **Number of Memberships:** Membership is available to "**subsidiaries**" (>50% ownership by another company) and "**affiliates**" (<50% ownership by another company) of an IOMA Voting Member company only if the subsidiary or affiliate is a separate legal entity from their parent company.

IMPORTANT:
PLEASE ATTACH
ONE (1) COPY
OF YOUR MOST
CURRENT SALES
BROCHURE

- Section 3.1. Any person, firm, or corporation engaged in the manufacture and sale of medical and/or industrial gases, including but not limited to oxygen, nitrogen, argon, hydrogen, acetylene, nitrous oxide, carbon dioxide, and helium, shall be eligible to be a **Voting Member** in this Association after one (1) full year of operation.
- Section 3.2. Any person, firm, or corporation substantially engaged in the engineering or manufacture of products necessary and incidental to the manufacture and primary distribution of industrial and medical gases shall be eligible to be an **Associate Member** in this Association after one (1) full year of operation. Associate Members shall have no voting rights with respect to the affairs of the Association nor shall representatives of said Members be eligible for election as Directors or Officers of the Association.
- Section 3.3. Any person, firm, or corporation desiring to become a Member of this Association may make application therefore (on a form approved by the Board of Directors) to the Board of Directors of this Association, which shall determine whether the applicant meets the eligibility requirements of the Association. Upon acceptance of such application by a majority of the Directors then in office and the payment of initiation fees and dues for the current year, such person, firm, or corporation shall thereupon become and be a qualified member of this Association.

Note: Fully completed membership applications will be processed after receipt of the annual dues, however, no prorating will be applied unless the application is submitted after that year's annual meeting.

INTERNATIONAL OXYGEN MANUFACTURERS ASSOCIATION, INC.

RR 1 Box 562
Roseland VA 22967
U.S.A.

+1 (703) 501 8581
info@iomaweb.org • www.iomaweb.org

Please attach one (1) copy of your most current sales
brochure with your application

FOR IOMA USE ONLY

Received: _____ Presented to Board: _____

Action: _____

Notified: _____ Effective Date of Membership: _____

Dues: \$ _____ Initiation Fee: \$ **0.00**