



## 2008 IBWA Candidate Bottler Membership Dues Form

### CANDIDATE BOTTLER PROGRAM

IBWA Candidate Bottlers are companies that bottle or package water within the United States who are not yet prepared to submit to the annual inspection required for IBWA Bottler members. The purpose of this program is to assist Candidate Bottlers in achieving compliance with all FDA and IBWA Bottler member inspection requirements. It allows a bottler to work through a two-year program, which includes a consultative visit from one of the two IBWA-approved, third-party inspection companies. A Candidate Bottler will not receive Bottler membership privileges until a satisfactory plant inspection score is reached and an application for IBWA Bottler membership is made.

### Renewing Members

Membership dues and consultation fees become payable **January 1, 2008**. To guarantee uninterrupted membership services, total payment, dues and fees, must be received at IBWA headquarters no later than **March 24, 2008**.

### I. CONTACT INFORMATION

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Website \_\_\_\_\_

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

Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
*(if different from the telephone number listed above)*

Email \_\_\_\_\_

Alternate Representative \_\_\_\_\_ Title \_\_\_\_\_  
*(Additional company employee to receive communications from IBWA as part of the program)*

Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
*(if different from the telephone number listed above)*

Email \_\_\_\_\_

*(Company information and information about gross sales will be used by IBWA only, in the aggregate with information from other IBWA members, when advocating for the bottled water industry with legislators and regulators)*

### II. COMPANY INFORMATION

Number of Employees \_\_\_\_\_

Bulk water sales?  Yes  No

Private label bottler?  Yes  No

HOD Provider?  Yes  No



**V. TYPES OF WATER SOLD** *(check all that apply)*

|  |  |
|--|--|
| <input type="checkbox"/> Spring Water        | <input type="checkbox"/> Mineral Water   |
| <input type="checkbox"/> Flavored            | <input type="checkbox"/> Purified/Drinking Water <i>(please select the type of purified water from the list below)</i> |
| <input type="checkbox"/> Sparkling           | <input type="checkbox"/> Distilled   |
| <input type="checkbox"/> Well Water          | <input type="checkbox"/> Deionized   |
| <input type="checkbox"/> Artesian Well Water | <input type="checkbox"/> Reverse Osmosis   |
| <input type="checkbox"/> Fluoridated         | <input type="checkbox"/> Remineralized   |

**VI. BRANDS**

List all of the proprietary/house brands your company produces, and specify which brands have added fluoride, as indicated on the label. Type or print clearly.

**Company Brands**

**Fluoridated Brands**

|    |    |
|----|----|
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |

*Attach a separate sheet if necessary*

Fax this membership dues form with credit card information to  
IBWA at 703-683-4074, or mail with credit card information or check payment to:

Membership Department  
IBWA  
1700 Diagonal Road, Suite 650  
Alexandria, VA 22314

For questions about IBWA membership, contact the IBWA Membership Department  
at 703-647-4615 or [ibwainfo@bottledwater.org](mailto:ibwainfo@bottledwater.org)

**NOTE: MEMBERSHIP DUES ARE PAYABLE ON JANUARY 1 OF EACH YEAR**