



APPLICATION FOR ACTIVE MEMBERSHIP

Please accept this as our formal application for membership in the Sorptive Minerals Institute (SMTI). If approved, we agree to abide by the articles set forth in the bylaws of the association.

Company Name: _____

Company Address: _____

Telephone: _____ **Fax:** _____

President: _____

Executive Vice President: _____

SMTI Board Representative: _____

Title

Telephone: _____ **E-Mail:** _____

Technical Representative: _____

Title

Telephone: _____ **E-Mail:** _____

Clay Products Manufactured and/or Distributed (Please Check):

Industrial Absorbents: _____ Agric. or Feed Products: _____

Pet Litter: _____ Other: _____

Signature and Title of Applicant: _____

Date: _____