

SUPPLIER MEMBERSHIP APPLICATION 2017



ILLINOIS CEMETERY & FUNERAL HOME ASSOCIATION (ICFHA)
 14608 John Humphrey Dr. Orland Park, IL 60462
 Phone - 866-758-7731 ***** Fax – 866-758-7732
 e-mail address – ICFHA @ hotmail.com
 website: www.icfha.org.

We hereby apply for Cemetery membership in the Illinois Cemetery & Funeral Home Association and agree to abide by the Bylaws of the Association and its Mission Statement provided in the ICFHA Roster.

SUPPLIER INFORMATION:

Recommended:

YES - BY ICFHA member. Name: _____
 No - I am in need of a sponsor.

This Application permits the membership of one named company and their named employee Representatives only.

Name of Supplier Applicant

Mailing address of Applicant

City State Zip Code +4

Business Phone

Fax Number

E-Mail

Website

Township County

Name of Registered Representative

Official Position

Representatives Preferred Mailing Address

Street Address

City State Zip +4

Business Phone

Fax Number

E-Mail

Additional Representative

Additional Representative are \$90.00 each. Please provide additional information on back of this form.

Business Phone

Fax Number

E-Mail

State Senate Dist.:

State Representative Dist.:

PRODUCT CODES

| | |
|-----------------------|-----------------------------|
| BM..... Bronze Marker | CRE Crematory |
| FH..... Funeral Home | GB..... Granite Bases |
| GBX..... Grave Boxes | GM..... Granite Markers |
| L..... Lots | LCR.....Lawn Crypts |
| M..... Monuments | MCR.....Mausoleum Crypts |
| N Niches | SG Scattering Gardens |
| UG Urn Gardens | V Vaults |

LIST OF SERVICES AND MERCHANDISE YOU OFFER FOR SALE:

Use product code above.

Dues _____ Add \$90.00 For each _____
 Additional Representative

TOTAL DUES \$ _____

REPRESENTATIVE INFORMATION

DATE: _____

SIGNATURE _____

TITLE _____

Please mail this completed application with your check to:

ICFHA Attn: MEMBERSHIP COMMITTEE - 14608 John Humphrey Dr. – Orland Park, IL. 60462

ICFHA Cemetery Membership Application (effective 11/5/2016) Entered: _____ Check # _____ Approved: _____ Password _____