



# 2024 Distributor Membership New and Renewal

Please check type: (  ) NEW (  ) RENEWAL (  ) DIST.ASSOC.

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

PPAI Member #: \_\_\_\_\_ ASI Member #: \_\_\_\_\_ SAGE Member #: \_\_\_\_\_

Principal: \_\_\_\_\_ Position: \_\_\_\_\_

Principal's Email: \_\_\_\_\_ Cell No: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Office Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Alternate Representative in CASA: \_\_\_\_\_ Position: \_\_\_\_\_

Alternate's Email: \_\_\_\_\_ Cell No: \_\_\_\_\_

**Total Membership Fee: \$200.00 for up to 3 reps (including Principal), \$225 up to 6 reps, \$250 more than 7 reps  
Main Distributor Associate (with Main Company paid Membership): \$100**

***New Members must submit 5 PPAI Supplier member invoices in the amount of \$250+ from different companies  
Membership is annually and runs from January 1<sup>st</sup> to December 31<sup>st</sup>***

Payment Form: Amount: \$ \_\_\_\_\_ (  ) Check No. \_\_\_\_\_ Payable to CASA (  ) Visa (  ) Master Card

Card Number: \_\_\_\_\_ Exp \_\_\_\_\_ Security Code \_\_\_\_\_

(  ) Cardholder name is the Principal's (  ) Card Billing address is the Postal – If not, please indicate below:

Number of Sales Representatives/Alternates in your Company to attend events: (Other than Principal and Alternate):

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

*I certify the above information is correct and we meet CASA's requirement for membership. By renewing my membership, I agree to abide by the CASA Bylaws, Rules and Regulations, Code of Ethics and Policies and Procedures.*

Distributor's Name

Principal's Signature

Date

Validated by C.A.S.A.

130 Winston Churchill Ave, PMB 266, San Juan, PR 00926-6018  
Tel: (787) 767-6919 Email: tu.casa.puertorico@gmail.com

**TOTAL CHARGE AMOUNT**