

**DISTILLED
SPIRITS
COUNCIL
OF THE
UNITED
STATES**

CRAFT DISTILLER AFFILIATE MEMBERSHIP APPLICATION

Please make check for \$500 payable to "Distilled Spirits Council" and return with completed form to:
Distilled Spirits Council · 1250 Eye Street, NW S. 400 · Washington, DC 20005 · Attn: Cheryl Hecht

MEMBERSHIP AGREEMENT:

Company Name _____

Hereby makes an application to join the Distilled Spirits Council of the United States, Inc. as a Craft Distiller Affiliate Member. Once such membership is approved by the DISCUS Board of Directors, a Craft Distiller is considered an Affiliate Member in good standing by abiding by all applicable federal, state and local laws and ordinances, and by paying such dues as may be assessed annually.

By _____ Signature _____
(TYPED) (WRITTEN)

Date _____ Title _____

COMPANY PROFILE:

Address _____
(STREET)

(CITY) (STATE) (ZIP CODE)

(TELEPHONE) (FAX) (WEBSITE)

Name and contact information of principal corporate officer:

(NAME) (TITLE)

(EMAIL) (PHONE)

Is applicant incorporated in the U.S.? _____ If so, in what state? _____

Applicant attests that distillery produces less than 40,000 cases per year.

(SIGNATURE)

Signed _____
(DISCUS CHAIRMAN)

Attest _____
(DISCUS CORPORATE SECRETARY)