



2020-2021 RETAIL MEMBERSHIP APPLICATION

Please complete this form and submit to:
200 West Bay Drive, Largo, FL 33770
P 727-596-7625 x100
F 855-815-9277
christy.dollins@munce.com

Retail Membership applies to Christian retailers affiliation. Retail members are entitled to free registration and eligibility for entry into the cash prize drawings at CPE trade shows.

COMPLIMENTARY FIRST YEAR MEMBERSHIP

Company Name		SAN#	
Address			
City		State	Postal Code
Telephone	Fax	Website	

Store Information (Please fill out as completely as possible to help us serve you better)

- Brick and mortar only
- Brick and mortar plus online
- Online only

Do you use Social Media for your store?

- Facebook
- Twitter
- Instagram
- Other _____

Total number of locations _____
 Square footage of main store _____
 Square footage of branch store _____

- Annual Sales Volume
- \$0 - \$100,000
 - \$100,001 - \$250,000
 - \$250,001 - \$500,000
 - \$500,001 - \$750,000
 - \$750,001 - \$1,000,000
 - More than \$1,000,000

What category best describes your store?

- Full service
- School/College
- Church
- Other _____

Do you have a store café?

- Yes
- No
- No, but we serve coffee

Product categories you sell
(Please check all that apply)

- Bibles
- Books
- Children
- Church Supplies
- DVD
- Fiction
- Gifts
- Music

What POS system do you use?

How would you best describe your primary customer base?
(Multi-cultural, active church-goers, high/low income, touristy, inner-city/rural, younger/older generation, etc.)

If there were one thing you feel your business does very well, what would that be?

If there were one area in your business that you would like to improve, what would that be?



RETAIL MEMBER APPLICATION

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Payment Information

Annual Affiliation Fee: \$120.00

COMPLIMENTARY FIRST YEAR

Payment is due March 31 of each year.

Revenue from dues and other sources are used for the benefit of Christian retail stores and the support and development of the trade association.

Main Contact

Name		Title	
Company Name		Address (if different from general address)	
City		State	Postal Code
Telephone	Fax	Email	

Secondary Contact

Name	Title
Telephone	Email

Billing

Contact (if different from main contact)		Title	
Address (if different from general address)			
City		State	Postal Code
Telephone	Fax	Email	

You will be invoiced annually with a due date of March 31st. Payment is due upon receipt

Communication Consent

- I agree to receive Christian Retail Association, Inc. communications and newsletter containing information about upcoming training, market development programs and events.
You can withdraw your consent at any time.

Thank you for your interest in Christian Retail Association, Inc. If you have any questions, please call 727-596-7625 x110 for assistance.