



AGRSS Council
800 Roosevelt Road, Bldg. C, Suite 312
Glen Ellyn, Illinois 60137
630-942-6597, rickc@agrss.com

Affiliate Membership Application

Applicants Corporate Legal Name

BY _____
Your Name

Address

Your Position with Applicant

City

State

Zip Code

Phone Number

In consideration of Applicant's acceptance as an Affiliate member of the Automotive Glass Replacement Safety Standard Council (AGRSS) Inc, Applicant hereby agrees as follows:

- 1. That Applicant will participate in the promotion of the AGRSS Standard, and its benefits to the consuming public and to the industry;
- 2. That Applicant will abide by the bylaws, policies and procedures of AGRSS including its logo usage policy;
- 3. That AGRSS may publish Applicant's name, or otherwise identify Applicant, as an Affiliate Member of AGRSS.
- 4. That it may use the AGRSS Affiliate member trademark so long as such use conforms to the AGRSS logo use policies.
- 5. AGRSS, its officers, committee members, staff and authorized AGRSS representatives (the "Indemnified Parties") shall have no liability for, and Applicant shall defend, indemnify and hold each of the Indemnified Parties harmless from and against, any claim, loss, demand, liability, obligation and expenses (including reasonable attorneys' fees) arising out of, pertaining to, or resulting in any way from Applicant's participation as an Affiliate Member or its participation in AGRSS activities or programs.
- 6. That it will pay its dues on a timely basis.
- 7. That the undersigned has complete authority from Applicant to execute this application on its behalf

Signature

Date

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Affiliate Membership Payment Dues Enclosed