



2010 DFA Membership Application

www.dominosdfa.com

Name: _____	Street/Suite: _____
# of Stores: _____ Franchisee Since: _____	City: _____
Email Address: _____	State/Zip: _____
Company Name: _____	Work Phone: _____
DMA(s): _____	Mobile Phone: _____

My Decision to Join was influenced by: _____

Dues for Renewing Members

of stores

Before Jan 12th: _____ X \$190 = _____

After Jan 12th: _____ X \$200 = _____

The early pay rate of \$190 only applies if you use the annual option to pay your dues in full.

You Can
Register & Pay Online at
www.dominosdfa.com

If you have never been a DFA member and would like to apply for a financial sponsorship please email Kimberley Lozano
kimberley@dominosdfa.com

Sponsorship - Contribute to the sponsorship fund to help pay dues for first time Members

_____ \$50 _____ \$100 _____ \$200 _____ \$400 _____ Other

Payment Method

Check #: _____ Amex _____ Visa _____ MC _____ Credit Card # _____

Name on card: _____ Exp. Date: _____

Billing Address: _____ Billing Zip Code: _____

Payment Option: ___ Annual ___ Semi-Annual ___ Quarterly ___ Monthly

Please Auto Renew my dues with this credit card. Payments will start the first week of January using the above payment option.

Authorized Signature: _____ Date: _____

Please **fax** this completed form to
866-812-7727

---or mail to---

Domino's Franchise Association
P.O. Box 536
Schertz, TX 78154

For questions, or if you would like to join via phone, please contact:

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kimberley@dominosdfa.com

Chief Executive Officer
Ken Peebles
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ken@dominosdfa.com