



**National Independent  
Concessionaires Association, Inc.**  
P O Box 89429, Tampa, FL 33689-0407  
(727) 346-9302 Fax (727) 346-9312  
email: nica@nicainc.org www.nicainc.org

Referred by: \_\_\_\_\_

O Mr. O Mrs. O Ms. First \_\_\_\_\_ Last \_\_\_\_\_  
Name of Business \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Permanent Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Fax Number: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Web Site \_\_\_\_\_

THE MORE INFORMATION YOU PROVIDE US - THE MORE DETAILED YOUR RECORD ONLINE AND IN THE DIRECTORY - PLEASE COMPLETE ENTIRE FORM!

**Type of Membership ( ✓ one Type Only)**

**Regular Voting Membership** is available to any person who is an independent concessionaire. This includes a partnership, sole proprietorship, joint venture, corporation, or other legally recognized entity which is an independent concessionaire.

**If concession business:** (circle one category only)  
Commercial Exhibits Food Games Retail Attractions  
Signs Custom Printing Uniforms

Provide a detailed description of the type of service your company provides:  
\_\_\_\_\_  
\_\_\_\_\_

**Associate Non-Voting Membership** is available to any other person, partnership, sole proprietorship, joint venture, corporation, or other legally recognized entity.

<input type="radio"/> <b>\$125</b> Regular Voting Member (concessionaire)	<input type="radio"/> <b>\$75</b> Regular Voting Spousal Member <small>(must be added by a current voting member)</small>
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**Concessionaire General Routing Information**

Please list all states where you conduct your concession business.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<input type="radio"/> <b>\$125</b> Fair/Festival over 75,000 attendance	<input type="radio"/> <b>\$75</b> Fair/Festival under 75,000 attendance	<input type="radio"/> <b>\$125</b> Associate	<input type="radio"/> <b>\$75</b> Employee
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**THE NICA SPONSORED \$10,000 ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY IS AUTOMATICALLY PROVIDED TO ALL REGULAR & EMPLOYEE MEMBERS.**

Beneficiary \_\_\_\_\_ Relationship \_\_\_\_\_ Address \_\_\_\_\_

**Mail Check or Money Order to: NICA at P O Box 89429, Tampa, FL 33689-0407**

We Accept:    (Please check One)

Credit Card No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Signature \_\_\_\_\_

I understand that my application is subject to final approval by the NICA Board of Directors. I also understand that if my application is not accepted, the amount paid will be refunded to me. If accepted for membership in NICA, I hereby agree to abide by its By-Laws and rules.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Spousal Signature \_\_\_\_\_ Date \_\_\_\_\_  
**(spousal signature is required when both are joining)**

**BENEFITS OF NICA MEMBERSHIP**

**\$10,000 AD&D INSURANCE POLICY** - regular, spousal and employee associate members only  
**CENTRAL SENTINEL** - security program participation  
**COCA-COLA** - national account pricing  
**COMMUNICATION** - with event management nationwide  
**DAC** - drug and alcohol testing  
**DR. PEPPER, SUNKIST & 7-UP** - national account pricing  
**FOOD SHOW** - exhibitor discounts & rebates  
**FORD** - fleet pricing  
**HEALTH INSURANCE** - access to affordable health insurance

**MICROTEL INNS & SUITES** - discount rates  
**NAPA** - national pricing profile  
**NICA NEWS** - monthly publication  
**NICA MEMBERSHIP DIRECTORY** - annual publication  
**PEPSI-COLA** - national account pricing  
**RV DISCOUNT PROGRAM** - special member discounts  
**SCHOLARSHIP PROGRAM** - regular members, spousal members and their children & grandchildren, and employee members  
**SHERWIN-WILLIAMS** - discounts nationwide  
**SPRINT** - 23% off Sprint and 13% off Nextel Service