



# SEAFOOD PRODUCTS ASSOCIATION

## APPLICATION FOR GENERAL MEMBERSHIP

*please see membership definitions on page 4*

Please send your completed application to the address at the end of this document. If you have any questions about the application or wish to check on the status of your membership, please contact Lenna Southland at 206-323-3540 or lsouthland@spa-food.org.

### Section I. Company Information

|   |      |                   |  |
|---|------|-------------------|--|
| Company Name:   |      |                   |  |
| A subsidiary or division of:  |      |                   |  |
| Headquarters Mailing Address:   |      | City, State, Zip: |  |
| Main Company Phone:   | Fax: | Website:          |  |
| Please list all food subsidiaries or divisions and plant locations of your company: |      |                   |  |
|   |      |                   |  |

On a separate sheet, please provide a description of your organization and your products and/or services (100 words or less). The description will be included with your listing in the *SPA Membership Directory*.

### Section II. Processing Information

- Does your company have a HACCP system?  Yes  No If yes, please enclose a copy of HACCP plan.
- Does your company utilize an independent thermal processing authority or consultant?  Yes  No  Not Applicable

If yes, please specify:

- Has your company ever used the services of a contract or private laboratory?  Yes  No
- Does your company provide co-packing services?  Yes  No
- Does your company utilize co-packing services?  Yes  No

If yes, please list:

- Please list your company's packaging and equipment suppliers:

### Section III. Chief Contact

The SPA Chief Contact receives all general and special mailings, names company representatives to serve on SPA committees and, as necessary, is the primary contact point for communicating the company's position on food-related issues.

Please identify the Chief Contact for your company:

|          |        |         |
|----------|--------|---------|
| Name:    | Title: |         |
| Address: |        |         |
| Phone:   | Fax:   | E-mail: |

I, the above, hereby certify that the products are processed and packaged in a sanitary processing plant(s), from wholesome raw materials and ingredients, in compliance with United States laws and regulations, and in such a manner that they will remain safe and wholesome under normal commercial methods of handling, distribution, and sale.

\_\_\_\_\_  
SPA Chief Contact Signature

## Section IV. Salmon Control Plan Products

Members who produce salmon products in hermetically sealed containers that have been thermally processed to commercial sterility are eligible to participate in the Salmon Control Plan (SCP). **If you do not produce such products, or if for any reason you do not wish to participate in the SCP, please skip this section.** If you would like to review the Salmon Control Plan before completing this section, please contact us and we will send a copy. SCP products reported should include all products eligible for the Salmon Control Plan in the previous year from all of your plants, regardless of ownership or distribution of the product (including product custom processed by you for another member). **DO NOT** include repacked product that is also included in original production numbers. If more room is needed use additional sheets. If you did not process eligible products in the previous year but you intend to do so in the current year, please provide an estimate for dues calculation purposes.

| Plant Location            | Product/Species | Container Type<br>(Cans, Pouches, etc.) | Container Size<br>(in oz. or lb.) | Case Size<br>(48's, 24's, etc.) | No. of Cases |
|---------------------------|-----------------|---|-----------------------------------|---------------------------------|--------------|
|                           |                 |   |                                   |                                 |              |
|                           |                 |   |                                   |                                 |              |
|                           |                 |   |                                   |                                 |              |
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|                           |                 |   |                                   |                                 |              |
|                           |                 |   |                                   |                                 |              |
|                           |                 |   |                                   |                                 |              |
| <b>TOTAL NO. OF CASES</b> |                 |   |                                   |                                 |              |

## Section V. Other Products

“Other Products” means all human and animal food products produced or sold in the United States by member companies, from all plant locations and subsidiaries, that are not covered under the Salmon Control Plan. All plant locations and subsidiaries in Alaska, Washington, and Oregon must be reported; reporting for plants in other areas is optional, but SPA member services will only be provided to plants that are included for dues calculation. Gross sales for the 12 months ending September 30 of the current year (or your last fiscal year) of all Other Products should be reported in US dollars, including Other Products produced by Salmon Control Plan participants. Gross sales do not include reductions for expenses, advertising or promotions. Do not report non-seafood products that are received for subsequent distribution without any processing (i.e., box-in, box-out). Contract Other Products processed for you by another company should be included in your gross sales.

Gross Sales in the previous year of all products not covered under the Salmon Control Plan. If you had no sales last year, please estimate anticipated sales for the current year.      \$ \_\_\_\_\_

***In the spaces provided, please list all Other Products. Attach additional sheets if needed.***

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## Section VI. Key Company Personnel

So that we can be sure to contact the appropriate people regarding SPA programs and other relevant information, please list all company representatives principally responsible for food-related areas of the business in the following categories:

|  |         |  |         |
|--|---------|--|---------|
| <b>CEO (Corporate)</b>                         |         | <b>President (Food Business):</b>                |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |
| <b>Government Affairs:</b>                     |         | <b>Regulatory Affairs</b>                        |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |
| <b>Scientific/Technical Affairs</b>            |         | <b>Sales/Marketing:</b>                          |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |
| <b>Chief Financial Officer/Tax Specialist:</b> |         | <b>Purchasing</b>                                |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |
| <b>Consumer Complaints:</b>                    |         | <b>Insurance/Risk Management:</b>                |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |
| <b>Public Relations/Media:</b>                 |         | <b>Person to whom dues bills should be sent:</b> |         |
| Name:  | Title:  | Name:  | Title:  |
| Phone:   | E-mail: | Phone:   | E-mail: |

I hereby certify the completeness and accuracy of the above information.

Please check this box and type full name to certify in lieu of signature if sent via email.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Data for 12 month period ending: \_\_\_\_\_

Who may we thank for referring you to Seafood Products Association? \_\_\_\_\_

If you have any questions about completing the application or wish to check on the status of your membership, please contact Lenna Southland at 206-323-3540 or [lsouthand@spa-food.org](mailto:lsouthand@spa-food.org).

## Section VII. SPA Confidentiality Statement

Company pack and sales data information is held in strict confidence by SPA and its staff. Data collected is used solely for the purpose of calculating membership dues, and under no circumstances is this data shared with another member company or outside party. If a company decides to cancel their membership with SPA, their information remains confidential. Any company information shared with SPA staff related to product formulation, processes, trade secrets, etc. is also held in strict confidence. All SPA staff are required to sign a nondisclosure agreement as a condition of their employment

with SPA. Upon leaving SPA, former employees are prohibited from disclosing confidential information obtained while at SPA.

As a national trade association, SPA and its employees are very sensitive to the fact that our membership includes competing companies. SPA employees **do not** assist members in efforts that would benefit one company to the detriment of another; rather, SPA works to support activities and programs of benefit to entire industry segments.

## Section VIII. SPA Membership Categories & Benefits

**General Member:** The full range of SPA benefits, including technical assistance, claims assistance, crisis management, regulatory consultation, communications assistance, education, and laboratory work are available for all General Members. Any Company, national or international, who is actively and regularly engaged in processing seafood and other food products or in marketing Contract Products is qualified to become a General Member of the Association, if such products are processed and packaged in a sanitary processing plant, from wholesome raw materials and ingredients, in compliance with United States laws and regulations, and in such a manner that they will remain safe and wholesome under normal commercial methods of handling, distribution and sale.

**Associate Member:** Associate Membership provides a forum for collaborative issue management related to domestic and international regulatory requirements and the opportunity to

network with customers and industry colleagues at Association functions, as well as access to publications and training materials. Any Company is qualified to become an Associate Member of the Association if it is actively and regularly engaged in furnishing services to the food processing industry; or is actively and regularly engaged in the manufacture of food packaging, food packaging materials, food processing equipment, machinery, non-food supplies, or food ingredients, for sale to the food processing industry in the United States. Any Company outside of the United States who is actively and regularly engaged in processing seafood and other food products, or in marketing Contract Products, is qualified to become an Associate Member of the Association if such products are processed and packaged in a sanitary processing plant, from wholesome raw materials and ingredients in such a manner that they will remain safe and wholesome under normal commercial methods of handling, distribution and sale.

## Section IX. The SPA Membership Approval Process

The SPA approval process can take up to two weeks from the date we receive the application. Your application is forwarded to the SPA President, who will review the application with our scientific staff. If there are any questions about your application, we will contact you by phone for clarification.

Upon approval of your membership, an invoice for your annual dues will be sent to the address you specify. Your membership will be activated upon our receipt of your first dues payment.

We would be happy to schedule a visit to your facility and

provide an orientation seminar to familiarize the rest of your staff with SPA benefits. Likewise, please feel free to let us know if you or any of your colleagues would like to visit the SPA office in Seattle, WA.

If for any reason your application is denied, we will notify you by fax or email and call you to discuss the reasons why your application was not approved.

We look forward to welcoming you as the newest member of the Seafood Products Association!

## Section X. Where to Send Your Application

To send via E-mail, please send to: [lsouthland@spa-food.org](mailto:lsouthland@spa-food.org)

To send via mail or fax, send to:

Seafood Products Association  
Lenna Southland  
1600 South Jackson St.  
Seattle, WA 98144  
Phone: 206-323-3540  
Fax: 206-323-3543