



Georgia Jewelers Association

Retail Membership Application

FULL NAME		TITLE	
BUSINESS NAME		BUSINESS ADDRESS	
YEAR BUSINESS ESTABLISHED		NUMBER OF OUTLETS (Attach a list of each outlet's address)	
BUSINESS TAX ID NUMBER		TOTAL NUMBER OF EMPLOYEES	
List Three Industry References			
NAME	PHONE NUMBER		ADDRESS
NAME	PHONE NUMBER		ADDRESS
NAME	PHONE NUMBER		ADDRESS
Please Submit the Following:			
☐ Photos of the inside and outside of your store location(s)			
☐ Business Stationary or a Business Card			
☐ First Membership Dues Payment			



Georgia Jewelers Association

Retail Membership Application

Annual Member Dues

Single Store	\$150.00
2 Stores	\$225.00
3 Stores	\$295.00
Each Additional Store above 3	\$65.00

Visa Mastercard American Express

Card #: _____

Exp Date: _____ SVC #: _____

Name on card:

Mailing address for card:

Signature:

Thank you for your interest in GJA!

Mail your completed Application and supportive documentation to:

Georgia Jeweler's Association
6175 Hickory Flat Hwy Suite 110
Canton, GA 30115

-or-

Email your completed Application and supportive documentation to:

Whitney Lince
whitney.lince@yahoo.com
770-826-5853