

**CURIOUS WHY  
YOU SHOULD JOIN?**

**LSA**

L I G H T I N G  
S H O W R O O M  
A S S O C I A T I O N



**HI THERE!**

We're the Lighting Showroom Association. The industry's fastest growing and only trade association that is focused exclusively on the empowerment and success of independent lighting showrooms.

**1**

### **SUPPORT**

Cohesive Industry Support and Advocacy, which has never been more important than now for Independent Lighting Showrooms. We lobby the issues critical to your day-to-day operations to forge cohesive industry partnerships.

**2**

### **COMMUNITY**

Access to Small Group Networking with a focus on the issues and goals that are most important for Showrooms. Our members have an exclusive network that helps showrooms grow and thrive.

**3**

### **CONTENT**

Exclusive member content including our massively popular holiday sale tracking calendar, price tracking, tips, and helpful document templates.

**4**

### **EXCLUSIVE PROGRAMS**

Members-only programs like the margin enhancing LSA Initiative. Available only to LSA Member Showrooms, the 2022 Initiative is designed to boost your showroom's profitability and success.

**5**

### **COMING SOON**

Industry Job Board, Continuing Education, Industry Recommendations, Newsletters, Events & more!

**SEE REVERSE FOR APPLICATION DETAILS**

We can't wait to have you join! Simply complete the application below and submit to Lisa Bartlett (lisa@lsamembers.org). If you have any questions, please email Lisa or call/text at 912-856-6934.

## LSA ANNUAL MEMBERSHIP DUES

Member Type	Dues Amount per Year (renews annually in January)
Independent Lighting Showroom	\$295
Manufacturer • Single/Primary Brand	\$995
Manufacturer • Additional Brands	\$495
Service Provider/Support Vendor	\$995
Sales Representative or Agencies	\$195

## MEMBERSHIP APPLICATION

Showroom/Company Name

Complete Mailing Address

Referred by

Phone Number

Website

Contact #1  
NAME & EMAIL

Notes/Comments

Contact #2  
NAME & EMAIL

Contact #3  
NAME & EMAIL

Signature

Date

Print Name

Time

## CREDIT CARD AUTHORIZATION

Name on the Card

Complete Billing Address

Credit Card Type    VISA    MASTERCARD    AMEX    DISCOVER    OTHER

Credit Card Number

Card Identification Number  
3 DIGITS ON THE BACK OR 4 FRONT FOR AMEX

Dues Amount: \$

Expiration Date

I authorize the Lighting Showroom Association, Inc. to charge the credit card provided above for the dues amount written above. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement. All provided information will remain confidential.