

SHOWTIME®

INTERNATIONAL
ITA Textile Alliance

Connections Happen Here.

2019

Nov 17-20

2020

May 17-20



IMPORTANT: Incomplete / unsigned applications will NOT be considered. Complete applications include: completed paperwork, sample of product with proof of ownership, and letter of recommendation.

A separate membership is required for each brand and/or subsidiary of a corporation in order to receive ITA member benefits including participation in ITA Showtime®.

Completed applications must be received by October 15 for consideration for inclusion in the November show and April 15 for consideration for inclusion in the May show.

a. BUSINESS INFORMATION

Name _____

Contact _____ / _____
title

Mailing Address _____

Phone _____ Mobile # _____

Email _____ Fax _____

Website _____

Social Media (facebook, twitter...) _____

b. Your BUSINESS PROFILE (Please attach additional literature and/or company brochures)

All information provided is strictly confidential and is for internal use by the ITA Office.

<input type="checkbox"/>	Manufacturer	%
<input type="checkbox"/>	Tanner	%
<input type="checkbox"/>	Floor Covering	%

<input type="checkbox"/>	Converter	%
<input type="checkbox"/>	Leather Distributor	%
<input type="checkbox"/>	Studio	%

<input type="checkbox"/>	Wholesaler	%
<input type="checkbox"/>	Agent / Importer	%
<input type="checkbox"/>	Supplier	%

of US Employees? _____ # of Designers on Staff? _____

Design Director: _____ Phone: _____ Email: _____

If International

US Agent: _____ Phone: _____ Email: _____

Mill Location (Physical location(s), including country, of mill(s) from which goods you are selling are produced.)

Please attach any printed brochures or literature about the mill(s).

Warehouse Location: _____

Your Line: Brief description (100 words max) to be used as part of your Directory Listing.

NON-MEMBER companies may NOT be referenced.

Distributor/Wholesaler/Agent/Importer - Your Suppliers (For association use only, not for distribution)

Company	Contact	Phone
Company	Contact	Phone
Company	Contact	Phone
Company	Contact	Phone
Company	Contact	Phone

Product Line What percent (%) of your line do you exclusively own? _____

	Upholstery	Window Coverings	Window Hardware	Trimmings	Outdoor	Contract	Leather
Your Line	%	%	%	%	%	%	%
Price Range	\$	\$	\$	\$	\$	\$	\$

Tradeshow Participation

Casual Living	Evteks	Heimtextil	MoOD	APLF
Neocon	Proposte	Other		Lineapelle

Exhibiting at ITA Showtime

Permanent	sq. ft.	Temporary	sq. ft.
-----------	---------	-----------	---------

The undersigned agrees to all terms and conditions of membership in ITA and agrees to follow all rules and procedures established by its board of directors.

ACCEPTED by: _____ / _____,
name / title
 representing _____ on _____, 20____.
company name

 Please initial here that you have read and agree to follow the Rules and Regulations stated in the ITA Compendium.

MEMBERSHIP DUES ARE NON-REFUNDABLE

International Textile Alliance
 305 West High Avenue, MS 276
 High Point, NC 27260