



The DFA exists solely as an organization of Franchisees helping Franchisees. To help ensure Domino's Franchisees have a strong collective voice, we need your involvement! These are difficult economic and competitive times, and now more than ever, Franchisees need to be united in order to improve your immediate financial health and long term success!

**"United we stand and divided we fall."**

Having you as a DFA member allows us to have a stronger voice for Domino's Franchisees!

Please fill in the information below.

New Member

Returning Member

Company Name: \_\_\_\_\_ F Code(s): \_\_\_\_\_

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

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_ DMA: \_\_\_\_\_ # of Stores: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

**Membership Dues: \$200 per store | Maximum dues \$7,500**

\*\*\*\*\*

**FOR CREDIT CARD PAYMENTS:**

Please indicate frequency of payments:  Annually  Bi-Annually  Quarterly  Monthly

Type of Card:  MC/Visa  Amex

Name as it appears on Credit Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Card Holder Address \_\_\_\_\_

Card Holder Phone \_\_\_\_\_

By signing this form, you authorize the Domino's Franchisee Association to process your credit card for your Membership Dues on an auto-renewal basis until such renewal is cancelled. If applicable, you are also granting permission to the DFA to process your credit card for Bi-Annual, Quarterly or Monthly Payments.

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

Printed Name \_\_\_\_\_

**Please return to: P.O. Box 536, Schertz, TX 78154 or fax to 210.659.0695  
Thank you for your support of the Domino's Franchisee Association!**