

* Required Fields (email will be used for renewals)

* Name _____

Title (required) _____

Company _____

* Address _____

* City _____

* State/Province _____

* ZIP/Postal Code _____

* Country _____

Phone Number _____

Fax Number _____

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HOUSE12

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B PRIMARY BUSINESS (required)

- 01** Textile Manufacturer (check one location type):
 - A. Headquarters
 - B. Plant Location
 - C. Distribution Center/Warehouse
 - D. Other _____
- 02** Fiber Producer
- 03** Supplier of Machinery/Dyestuffs/Chemicals/etc. to the Textile Industry
- 04** End-User of Textiles, including Apparel Manufacturer
- 05** Other _____

Would you like to receive *Textile World's* FREE weekly E-Newsletter?

YES! No

Signature _____

E-mail (required) _____

C MANUFACTURING PROCESSES

From the list below, please check **ALL** of the manufacturing processes in which you are personally involved or for which you are responsible.

In the following space, please write the code number of the **PRIMARY** process you are involved in:

- 01** Yarn Preparation (including opening, carding, drawing, roving, spinning, twisting, winding and warping)
- 02** Weaving (including warping and slashing)
- 03** Knitting (including flat, circular and hosiery)
- 04** Dyeing, Printing, Finishing
- 05** Nonwovens/Flocking
- 06** Carpet and Rugs (including tufting)
- 07** Texturizing
- 08** Industrial Fabrics
- 09** Fiber Producers (including man-made and natural)
- 10** Quality Control
- 11** Plant Maintenance and Industrial Engineering
- 12** Material Handling, Packaging and Shipping
- 13** Other _____

Complete this form and FAX to 770-952-0669