



## THE VISION COUNCIL

The Vision Council represents the manufacturers, suppliers, providers and retailers in the vision community. We offer a wide variety of resources and tools to help our members succeed in their businesses, from research and training to industry networking events and consumer outreach.

### MEMBERSHIP APPLICATION

Company: \_\_\_\_\_

Key Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

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

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Website: \_\_\_\_\_

Referred by: \_\_\_\_\_

*(Please select all that may apply):*

#### Professional Interests:

- |   |  |
|---|--|
| <input type="checkbox"/> Market Research                | <input type="checkbox"/> Regulatory Affairs                    |
| <input type="checkbox"/> Finance/Administration         | <input type="checkbox"/> Trade Shows                           |
| <input type="checkbox"/> Technical Issues/<br>Standards | <input type="checkbox"/> Sales & Marketing                     |
| <input type="checkbox"/> Public Relations/Brands        | <input type="checkbox"/> Consumer Education                    |
| <input type="checkbox"/> Product Development            | <input type="checkbox"/> Professional Development/<br>Training |

#### We sell/service the following products:

- |  |   |
|--|---|
| <input type="checkbox"/> Ophthalmic Frames<br>(fronts and temples) | <input type="checkbox"/> Sunglasses                             |
| <input type="checkbox"/> Optical Instruments                       | <input type="checkbox"/> Spectacle Cases                        |
| <input type="checkbox"/> Ophthalmic Lenses                         | <input type="checkbox"/> Contact Lenses                         |
| <input type="checkbox"/> Optical Equipment                         | <input type="checkbox"/> Other <i>(please specify)</i><br>_____ |
| <input type="checkbox"/> Laboratories                              | _____   |

### MEMBERSHIP TYPES

*(Please select one below):*

- Full Member:** Any person, firm or corporation conducting business in North America, whose primary business is the manufacturing, processing and/or distribution or sale of optical equipment, frames, lenses, contact lenses, and other eyewear and eyecare related products, and/or services. Full Members are entitled to receive all of the services of the Council, and are entitled to vote and hold office.
  
- Trade Media Member:** Available to any person, firm or corporation providing trade media service to Full or Associate Members of The Vision Council. Dues: \$3,150.

**Division** *(Select the division below that best reflects your business.)*

- |   |  |
|---|--|
| <input type="checkbox"/> Eyewear & Accessories (Frames)           | <input type="checkbox"/> Retail  |
| <input type="checkbox"/> Lens, Lab and Lens Processing Technology | <input type="checkbox"/> Over the Counter (Sunglasses and Reading Glasses) |
| <input type="checkbox"/> Contact Lens                             | <input type="checkbox"/> Technology  |
| <input type="checkbox"/> Healthcare                               |  |

# 2025 DUES STRUCTURE

## Full Members Dues Structure

Annual Sales in North America	Dues Rate
\$2,000,000 and Below	\$1,103
\$2,000,001 - \$3,000,000	\$1,654
\$3,000,001 - \$5,000,000	\$2,205
\$5,000,001 - \$10,000,000	\$3,859
\$10,000,001 - \$15,000,000	\$5,513
\$15,000,001 - \$20,000,000	\$7,166
\$20,000,001 - \$25,000,000	\$8,820
\$25,000,001 - \$30,000,000	\$10,474
\$30,000,001 - \$35,000,000	\$12,128
\$35,000,001 - \$40,000,000	\$13,781
\$40,000,001 - \$45,000,000	\$15,435
\$45,000,001 - \$50,000,000	\$17,089
\$50,000,001 - \$55,000,000	\$18,743
\$55,000,001 - \$60,000,000	\$20,396
\$60,000,001 - \$65,000,000	\$22,050
\$65,000,001 - \$70,000,000	\$23,895
\$70,000,001 - \$75,000,000	\$25,358
\$75,000,001 - \$80,000,000	\$27,011
\$80,000,001 and Above	\$27,563

### Subsidiary Fee

A subsidiary fee, which is 10% of the parent company dues rate, will be added for each separate company listed in The Vision Council database.

## MEMBERSHIP PAYMENT

Please note that all fields below are required.

Primary Financial Contact Name (for The Vision Council dues):

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Annual Sales (confidential): \_\_\_\_\_

Dues Rate: \_\_\_\_\_

We hereby apply for membership as a full/associate/trade media member in The Vision Council and agree to abide by its bylaws, to comply with all provisions thereof and to pay all such dues and assessments as may be levied there under by action of the regular members. We certify that the above information is true and correct to the best of our knowledge.

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

Title: \_\_\_\_\_

Date: \_\_\_\_\_



### Please remit completed application to:

The Vision Council  
 Attention: Member Services  
 225 Reinekers Lane, Suite 700  
 Alexandria, VA 22314

For added convenience, completed applications may be emailed to The Vision Council at [info@thevisioncouncil.org](mailto:info@thevisioncouncil.org). Visit [thevisioncouncil.org/members](http://thevisioncouncil.org/members) to learn more about the wide variety of resources and tools available to help you succeed in your business.