2017 EXECUTIVE BOAR D

CHAIRPERSON
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Bozzuto's

DIRECTOR
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Griffin Publishing

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Dan Fudger
C & S Wholesale Grocers

VICE PRESIDENT
Bob Jones
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VICE PRESIDENT
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Acosta Sales & Marketing

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NEWFDA

NorthEast Wholesale Food Distributors Association

January 2017

Dear NEWFDA Member,

On behalf of the NorthEast Wholesale Food Distributors Association, we are happy to welcome you as a member. NEWFDA is a dynamic organization that represents its member companies and thousands of workers in the industry. Our strength depends on the continued membership of companies like yours, and we appreciate your support.

NEWFDA is committed to staying at the forefront of issues affecting the Wholesale Food Distribution industry, and working together to provide the following important benefits and services to our members:

NEWFDA Scholarship Program

The NEWFDA Scholarship program has provided over $760,000 in scholarship awards to college-bound students of NEWFDA member families as part of our on-going commitment to promoting excellence in education within the Wholesale Food Distribution community. To take advantage of this important benefit, please visit www.newfda.org.

Networking Events/Opportunities

The **Annual NEWFDA Convention** is an event not to be missed! An outstanding opportunity to network with colleagues and customers in a beautiful and relaxed setting, this four-day family getaway is packed with many fun events as well as a business seminar, and offers many opportunities to network with executives from across the Northeast.

At **NEWFDA's Annual Golf Outing**, golfers enjoy a day out on the course with colleagues and clients while supporting the NEWFDA Scholarship Fund. Join us on Tuesday July 11, 2017 for NEWFDA's Annual Golf Outing at Lake of Isles at Foxwoods, a beautiful and challenging course, rated #1 in Connecticut. This event will sell out, so register today at www.newfda.org.

Your membership means that the Northeast Wholesale Food Distributors Association will continue to play an active and vital role in strengthening our industry in the year ahead.

Thank you for your support. We look forward to serving you in the coming year!

Sincerely,

Kevin Griffin
Director

Sharon Delaney
Chairperson

NORTHEAST WHOLESALE FOOD DISTRIBUTORS ASSOCIATION
ENRICHING OUR INDUSTRY THROUGH NETWORKING AND EDUCATION
PO Box 2826, Duxbury, MA 02331 • (781) 829-6715 • www.NEWFDA.org

NEWFDA
NorthEast Wholesale Food Distributors Association

2017 NEWFDA MEMBERSHIP APPLICATION

The Northeast Wholesale Food Distributors Association is a dynamic organization that represents thousands of employees in the industry. NEWFDA is committed to staying at the forefront of issues affecting the Wholesale Food Distribution industry, and working together to provide important benefits and services to our members.

Please provide the following information:

Company:_____

Contact Name:_____

Address:_____

City:_____ State:_____ Zip: _____

Office Phone:_____ Cell:_____

Fax:_____ E-mail:_____

Member dues make it possible for NEWFDA to provide world-class networking events, education, and support to its many members in the Northeastern United States. Dues are set based on the calendar year.

Annual Membership Dues

$750.00

Type of Organization

___ Broker/Retail ___ Broker/Foodservice

___ Mfg/Retail ___ Mfg/Foodservice

___ W/Grocer ___ F/S Distributor

___ Spec Food Dist ___Other(Explain

Signature:_____Phone: _____

E-mail:_____

Please e-mail this completed form to kgriffin@newfda.org.

NORTHEAST WHOLESALE FOOD DISTRIBUTORS ASSOCIATION

ENRICHING OUR INDUSTRY THROUGH NETWORKING AND EDUCATION

PO BOX 2826 · DUXBURY, MA 02331 · (781) 829-6715 · WWW.NEWFDA.ORG

MEMBERSHIP BENEFITS

NEWFDA provides networking and educational opportunities to Distributors, Wholesalers, Manufacturers, and Sales agencies in the food distribution industry to foster longterm business relationships, which in turn, strengthen our industry.

Established in 1875, the Northeast Wholesale Food Distributors Association is the nation's oldest food association. We address the issues and challenges faced by Distributors, Wholesalers, Manufacturers, and Sales agencies and provide a common ground for effective solutions. We are proud to offer our members professional development programs, professional networking opportunities, scholarship assistance, and recreational discount programs.

Professional Networking
Scholarship Assistance
Professional Development

The Northeast Wholesale Food Distributors Association is a dynamic organization dedicated to serving the needs of the Northeast Food Distribution community.

FIND OUT MORE

NEWFDA is a dynamic organization that represents its member companies and thousands of workers in the industry. We are committed to staying at the forefront of issues affecting the Wholesale Food Distribution industry, and working together to provide important benefits and services to our members.

Enriching our Industry through Networking and Education Since 1875

Get in touch with us.

Northeast Wholesale Food Distributors Association

www.newfda.org
PO Box 2826
Duxbury, MA 02331

Kevin Griffin
kgriffin@newfda.org
(781) 829-6715

Northeast Wholesale Food Distributors Association

Wholesalers
Sales Agencies
Foodservice Distributors
Manufacturers

Enriching our Industry through Networking and Education

NEWFDA
NorthEast Wholesale Food Distributors Association
www.newfda.org

NEWFDA's Scholarship Program

The NorthEast Wholesale Food Distributors Association has excellent opportunities for our member families and their dependents to benefit from the NEWFDA Scholarship Program. To date, NEWFDA has awarded over $760,000 in scholarship funds to students of **NEW**FDA member families, due in large part to the generosity of our members. Events such as NEWFDA' s Annual Convention, and the Annual Golf Outing support the Scholarship Program.

NorthEast Wholesale Food Distributors Association NEWFDA is committed to promoting excellence in education within the Wholesale Food Distribution community.

Application deadline:

June 9, 2017

NEWFDA
NorthEast Wholesale Food Distributors Association

Kevin Griffin
PO Box 2826 • Duxbury, MA 02331
(781) 829-6715
Email: kgriffin@newfda.org

NorthEast Wholesale Food Distributors Association
SCHOLARSHIP APPLICATION

APPLICATION DEADLINE:

June 9, 2017

Completed applications must be accompanied by:

- Essay of at least 300 words explaining why you should be awarded with a NEWFDA scholarship.
- Current photograph of yourself (preferably head shot) for scholarship recipient poster.
- Current high school and college transcripts (transcripts should not be sent separately).
- Note: Resumes are permitted, but are not a substitution for completed applications. Incomplete or illegible applications will not be considered.

Please send completed scholarship package to: Kevin Griffin • PO Box 2826, Duxbury, MA 02331 • (781) 829-6715 • kgriffin@newfda.org

Student Name_____
Last First Middle

Address_____
Street City State Zip

Email_____ Phone_____

Referred by (NEWFDA Member)_____
Name Company Relationship

Have you previously applied?_____ Year(s)_____

Academic Information

Name of College where you are currently enrolled_____

Field of Study_____

High School	Address	Graduation Date
College	**Address**	**Dates of Attendance & Anticipated Graduation**

Please list any disctinctions, honors and/or awards you have received while in high school or college and explain the basis for selection.

Honor/Award	Basis for Selection

Please list extra-curricular, community activities and/or significant work experience. Please list no more than four in order of importance. Provide dates and indicate if you held an office, and if the office was an elected or appointed position. Re: Time Commitment, please indicate the period of time involved and how many hours you devoted to the activity (i.e., 1 semester, 4 hrs/wk, 40 hrs/wk, etc.)

Activity	Years	Time Commitment	Office/Position

I certify that the above information is true and complete. I understand that withholding information requested, or giving false information may make me ineligible for consideration.

Applicant Signature Date

NEWFDA NorthEast Wholesale Food Distributors Association

www.newfda.org • PO Box 2826 • Duxbury, MA 02331 • (781) 829-6715
Kevin Griffin • kgriffin@newfda.org

Join us for a day of fun and networking as we raise funds for the NEWFDA Scholarship Program!

Contest & Prizes Include:
Hole in One Contest
$1,000 in Door Prizes

Check-in/Breakfast 7:30 AM – 9:15 AM
Tee Time 9:30 AM
On-Course Lunch 11:30 AM
Dinner Buffet 2:30 PM

REGISTER NOW!

NEWFDA
NorthEast Wholesale Food Distributors Association

Kevin Griffin
PO Box 2826 • Duxbury, MA 02331
(781) 829-6715
Email: kgriffin@newfda.org

The Seventeenth Annual

NEWFDA GOLF OUTING

Tuesday, July 11, 2017
Lake of Isles
at Foxwoods Resort & Casino

REGISTRATION

Company Name:_____ Contact Name:_____

Address:_____

City:_____ State: _____ Zip:_____

Phone:_____ Email:_____

Credit Card Type:_____ Card #:_____

Expiration Date:_____ Sec. Code:_____

**If you are interested in reserving a hotel room at Foxwoods, please contact Kevin at kgriffin@NEWFDA.org.

PARTICIPATION LEVEL

☐ Foursome $2,800
(Includes hole sponsorship, greens fees, cart, meals)

☐ Single Player $675
(Includes greens fees, cart, meals)

☐ Dinner Only $250

SPONSORSHIP OPPORTUNITIES

Sponsoring a portion of the NEWFDA Golf Outing promotes your company while helping to offset cost of the event, allowing more funds to go to the NEWFDA Scholarship Fund. Your support will be recognized in various ways, as outlined in the following descriptions.

☐ Hole Sponsor $650
(Includes sponsor signage with company logo featured at tee)

☐ Breakfast Sponsor $2,000
(Includes sponsor signage with company logo featured prominently at breakfast)

☐ On-Course Lunch Sponsor $5,000
(Includes sponsor signage with company logo featured prominently within boxed lunches)

☐ Après-Golf Dinner Sponsor $7,500
(Includes sponsor signage with company logo featured prominently at Dinner)

☐ Scholarship Sponsor $1,000
(Includes sponsor signage with company logo featured prominently at event)

FOURSOME PLAYERS

Player #1:_____
Email:_____

Player #2:
Email: _____
_____

Player #3:_____
Email:_____

Player #4:_____
Email _____

NORTHEAST WHOLESALE FOOD DISTRIBUTORS ASSOCIATION
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PO Box 2826, Duxbury, MA 02331 • (617) 922-4300 • WWW.NEWFDA.ORG • kgriffin@newfda.org

SAVE THE DATE!

LaPlaya Beach & Golf Resort

NAPLES, FLORIDA

NEWFDA 2017 Convention Registration

LaPlaya Beach & Golf Resort
Naples, FL
November 2-5th, 2017

NEWFDA
NorthEast Wholesale Food Distributors Association

Rate Information

Occupancy Rates (per person)	Children's Rates (Apply when sharing room with one or more paying adults)	Registration Fee
Double: $1995 Single: $2495 Suite Double Occupancy: $2995	Under age 2: Free Age 3 – 10: $450 Age 11 – 17: $500	Members-Included with stay Non-Members (per room) $350

Registrant Information

Company:_____ Name:_____

Name as it will appear on your badge:_____ Title:_____

Address:_____ City:_____ State:_____ Zip:_____
(*Home address required for home delivery)

Phone:_____ Fax: _____ Email:_____

Spouse's Name & E-mail Address (if applicable): _____

Flights: Please check the appropriate box: ☐ I would like NEWFDA to arrange my flight reservations ☐ I will make my own flight reservations

	GUEST ROOM FEE			*AIRFARE*				GOLF						
Registrant Names	Double Occ. Nov. 2-5 $1995 pp	Single Occ. Nov. 2-5 $2495 pp	*Suite Dbl Occ. Nov. 2-5 $2995 pp	Airfare: Newark: Nov. 2-5 MARKET	Airfare: Boston Nov. 2-5 MARKET	Airfare: Hartford Nov. 2-5 MARKET	Airfare: Man – NH Nov. 2-5 MARKET	Golf $200 pp	Golf Club Rental $75	Child Age 3-10 $450/child Age 11-17 $500/child	Date of Birth	Registration Fee (Member) Included w/Room Registration Fee (Non-Member) $350 Room	Additional Nights Per Night $450: Std $695: Suite	Total

*Rate includes accommodations, resort fees, family activities, daily breakfast & dinner, entertainment, and taxes.
**Suites are limited; please register early if you would like to reserve a suite.
Airfare pricing is separate: MARKET RATES ON FLIGHTS BOOKED THROUGH NEWFDA

Payment Method

☐ AMEX ☐ Visa ☐ Mastercard ☐ Check (Please make checks payable to NEWFDA)

Card #:_____ Cardholder Name:_____ Exp:_____ Charge Amount: $_____ Signature:_____

Cardholder acknowledges receipt of goods and/or services in the amount of the total shown and agrees to perform the obligation set forth in the Cardholder's agreement with the issuer.

Mail with check or credit card information to: NEWFDA, P.O. Box 2826, Duxbury MA 02331 · E-mail Kgriffin@NEWFDA.org · Telephone: (781) 829-6715 Cell: (617) 922-4300