

Made in Skagway

Membership Renewal Application

Please complete and mail this application with a check or money order payable to the "Skagway Development Corporation", PO Box 1236, Skagway AK 99840, emailing skagdev@aptalaska.net or deliver to the SDC office on 9th Ave. & State St.

For questions, e-mail skagdev@aptalaska.net or call 907-983-3414.

*Required Fields

*Artisan's Business Name: _____
(One used on most recent former membership application)

*Artisan's First Name: _____ *Last Name: _____
(One used on most recent former membership application)

Please Update the Following (Only check those to be updated)

Artist information: Business Name Artist's Name Mailing Address Physical Address

Email Phone Artist Bio

Business License Numbers: Municipality of Skagway State

Product Information: Type/s Description Pictures Manufacturing Info

Marketing/ Sale Locations: Social Media Esty Website Sale Locations

Only fill-out the components below that need to be updated

Artist Information:

Mailing Address: PO Box _____ Skagway, AK 99840

Physical address: _____

Email: _____ Phone: _____

Artist Bio:

Business License Numbers:

Municipality of Skagway Business License Number: _____

State of Alaska Business License Number: _____

Product Information

Product type/s (Check all that apply): Ceramic, Pottery & Glasswork Fibers & Textiles
Bath & Body Jewelry Sculptures & Carvings Food & Drink Imagery Artwork Other

Please e-mail new high resolution images of your work to skagdev@aptalaska.net

Product Description:

Description of local manufacturing operations. If non-Skagway residents are involved in the manufacturing or packaging of your products, please explain their involvement:

Description of components manufactured outside of Skagway. Is this item available from a Skagway origin or resource? If so, explain why you do not obtain these items from a Skagway origin or source:

Marketing/ Sale Locations

Social Media: Facebook Pinterest Instagram Other _____ Etsy Shop: Yes No

Please provide Social Media and/or Etsy Shop Name/s: _____

Website: _____ No longer

Other online location where products can be purchased:

Locations in Skagway where products are sold:

Locations outside of Skagway where products are sold:

Economic Data

Please help SDC track the impacts of the Made in Skagway program by providing the following information. All information provided will be kept confidential, individual information will not be shared.

Estimated gross sales for previous 12 months: \$ _____ (leave blank if new business)

If measurable, what percentage of those sales can be attributed to the Made in Skagway program? _____

Including yourself and family members, do you have employees? Yes No if "Yes" how many? _____

I, the undersigned, do hereby certify that I produce a handicraft or manufactured product within the boundaries of the Borough of Skagway and that these products satisfy the requirements for the Made in Skagway program as specified by this membership application. I request authorization to use the Made in Skagway mark on my products created within the boundaries of the Borough of Skagway. I take full responsibility for the proper use of said mark in accordance with the above guidelines. I consent to an on-site inspection, by appointment, of my facility by an SDC representative.

Name (Print): _____

*Signature _____

*Date: _____

Fees included (or coming in the mail if application is emailed): Annual Membership due \$10.00

Do Not Write Below this Line

Date Received ___/___/___ **by:** _____

Continues to meet Made in Skagway criteria: Yes No