



## membership application

### business information

please attach your business card here →

If your business card is lacking any of the information below, please write it below:

business name, address, city, state, zip, phone, e-mail, website

\_\_\_\_\_

primary contact: \_\_\_\_\_ email: \_\_\_\_\_

number of employees (including owners): \_\_\_\_\_ business type: \_\_\_\_\_

### were you referred to asba? check all that apply

\_\_\_ referral from: asba member: \_\_\_\_\_ asba board member: \_\_\_\_\_

is there an asba staff member working with you? if so, please list: \_\_\_\_\_

### what resources are of most interest to you? check all that apply

\_\_\_ networking    \_\_\_ education    \_\_\_ mentoring    \_\_\_ health insurance    \_\_\_ advertising

\_\_\_ association safety program    \_\_\_ other: \_\_\_\_\_

### annual membership dues

1 – 25 employees: \$150    |    26 – 100 employees: \$250    |    101 + employees: \$500

**+ \$35 application fee**

dues are payable by check or credit card. please make checks payable to asba.

credit card payment: \_\_\_ visa    \_\_\_ mastercard    \_\_\_ amex    \_\_\_ discover

card number: \_\_\_\_\_ exp date: \_\_\_\_\_

name on card: \_\_\_\_\_

signature: \_\_\_\_\_

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