

PRODUCTS/SERVICES - AMERICAN BUS ASSOCIATION MEMBERSHIP APPLICATION



MC21

<p>Product/Services Benefits:</p> <ul style="list-style-type: none"> ● Increase Your Motorcoach Business ● Identify New Bus and Tour Operators in North America ● Develop Business to Business (B2B) relationships ● Participate in Relevant Education and ● Professional Training & Certifications 	<p>Select ONE Membership Option</p> <p>Hardware/Service Supplier</p> <p><input type="checkbox"/> \$290: 2022 Membership <i>(12-month membership: \$580)</i></p> <p>Bus Manufacturer</p> <p>\$1,445: 2022 Membership <i>(12-month membership: \$2,890)</i></p> <p>Membership Expiration Date: 12/31/2022.</p>	<p>Organization's Primary Category:</p> <hr/>
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COMPANY NAME:

MANAGEMENT COMPANIES (if applicable): Identify affiliated companies. Submit additional pages if needed.

CONTACT NAME:	CONTACT TITLE:
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MAILING ADDRESS:

CITY:	STATE/PROVINCE:	ZIP CODE:	COUNTRY:
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E-MAIL:	PHONE:	FAX:
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WEBSITE:	YOUR GOV'T AFFAIRS CONTACT NAME, EMAIL & PHONE:
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SECONDARY CONTACT NAME, PHONE AND EMAIL:

HOW DID YOU HEAR ABOUT US:	REFERRED BY PERSON/COMPANY (IF APPLICABLE)
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PAYMENT INFORMATION: All fees are in U.S. Dollars. There is no initiation fee for joining ABA. ABA's dues are not transferable.

<input type="checkbox"/> CREDIT CARD PAYMENT AMOUNT\$ _____	<input type="checkbox"/> CHECK ENCLOSED PAYMENT AMOUNTS _____
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Card Number	Expiration Date	Name on Card
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By signing this form, I am agreeing to the membership conditions and Code of Ethics available on the American Bus Association website.

SIGNATURE:

PRINTED NAME:	DATE:
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MAIL: Membership Department/ABA 111 K St., NE, 9th Fl. Washington, DC 20002	FAX: 202-842-0850
	EMAIL: membership@buses.org

Note: ABA rents its mailing list to members and includes company email addresses. If you do not wish your address or email included, please notify ABA at membership@buses.org. Use of ABA logo by periodicals does not imply endorsement.

Questions: Contact the ABA Membership Department at 202-842-1645.