

Products/Services-AMERICAN BUS ASSOCIATION MEMBERSHIP APPLICATION



Product/Services Benefits: <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 	Select ONE Membership Option Hardware/Service Supplier <input type="checkbox"/> \$580: 2020/21 Membership \$2,175: 2020/21 Membership & 2021 Marketplace Seller Registration Bus Manufacturer <input type="checkbox"/> \$2,890: 2020/21 Membership Note: Quarterly Installment Payment Option Available Upon Request	Organization's Primary Category: _____
--	---	--

COMPANY NAME: _____

MANAGEMENT COMPANIES (if applicable): Identify what properties that you represent. Submit additional pages if needed.

CONTACT NAME: _____	CONTACT TITLE: _____
----------------------------	-----------------------------

MAILING ADDRESS: _____

CITY: _____	STATE/PROVINCE: _____	ZIP CODE: _____	COUNTRY: _____
--------------------	------------------------------	------------------------	-----------------------

E-MAIL: _____	PHONE: _____	FAX: _____
----------------------	---------------------	-------------------

WEBSITE: _____	TOLL FREE: _____
-----------------------	-------------------------

SECONDARY CONTACT NAME, PHONE AND EMAILS:

HOW DID YOU HEAR ABOUT US: _____	REFERRED BY PERSON/COMPANY (IF APPLICABLE) _____
---	---

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 _____
---	--

Card Number _____	Expiration Date _____	Name on Card _____
-------------------	-----------------------	--------------------

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: _____
----------------------------	--------------------

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 or 800-283-2877.