



ASSOCIATE MEMBERSHIP APPLICATION

7931 NE Halsey Street, Suite 212, Portland, OR 97213
 (503) 253-9898 or (800) 730-7282, FAX (503) 253-9890
www.aboutNATA.org

I (we) hereby apply for membership in Northwest Automotive Trades Assn. (NATA). I (We) agree to be governed by the By-Laws of the Association, to observe its code of ethics and follow the policies set forth by the Board of Directors.

Business Name _____ Corporate Name (if different) _____

General Contact Person _____ Additional Contact Person _____

Street Address _____ City _____ State _____ Zip _____

Phone Number _____ FAX Number _____ Mailing Address (if different) _____

Website Address _____ Email Address _____ Major Business Activities _____

Number of Employees _____ Year Business Started _____ Branch Names/Addresses: _____

How would you like to receive your information?
 E-mail FAX

Please e-mail your logo to Cathi@aboutnata.org

PLEASE GIVE US A SHORT DESCRIPTION OF YOUR FIRM:

Applicant Signature _____ Date _____

APPLICATION MUST BE COMPLETE AND ACCOMPANIED BY CHECK OR CREDIT CARD INFORMATION
ANNUAL MEMBERSHIP DUES: \$300.00

Payment: Enclosed Check Number _____
 VISA or MasterCard# _____ Exp. _____ 3 Digit Security Code _____
 Name as it appears on card: _____