

2012 MEMBERSHIP APPLICATION

BUSINESS INFORMATION

Member Name

Title:

Company Name:

Company Address:

City:

State:

Zip:

Business Phone

Business Fax:

Email Address:

Website:

PERSONAL INFORMATION

Address:

City:

State:

Zip:

Personal Phone:

Ext.

MISC. INFORMATION

Preferred mailing address Business Personal *(Check one)*

Ethnicity: _____ *(for Statistical Purposes Only)*

Membership Classification:

Line Group Affiliation: GMMDA / FMMDA / The Alliance / TLMDDA / DCMDDA *(Circle all that apply)*

MEMBERSHIP DUES

**Annual Membership Dues are based on calendar year.*

Payment Type: [Check] [Credit Card]

***Total Remitted: \$**

If paying by company check, please ensure that members name appears on check)

Visa MC Amex Card # _____ Exp. Date _____

Name as it appears on card:

Signature :

Please remit all payments to:

NAMAD

8201 Corporate Drive, Suite 550

Lanham, Maryland. 20785

Fax (301)-306-1493

**Premier dues are on a per Dealership basis.*

MEMBERSHIP CLASSIFICATION

CLASSIFICATION OF MEMBERSHIP FOR WHICH YOU ARE APPLYING

Checks must be made payable to NAMAD: (Please select one)

- Premier Member: \$500.00 per dealership. (Full voting rights and eligibility to serve on the NAMAD Board of Directors and NAMAD Committees. Limited to those persons of ethnic minority descent who currently own a dealership). For dealers who are members of applicable line group associations or international nameplate dealers.

- ❑ Regular Member: \$5,000.00 per dealership for members who are not members of the applicable line group association. (Full voting rights and eligibility to serve on the NAMAD Board of Directors and NAMAD Committees. Limited to those persons of ethnic minority descent who currently own a dealership)

- ❑ Dealer Candidate: \$150.00 (Non-voting member. May not serve on the NAMAD Board of Directors. These members may serve on NAMAD Committees.)