



# APPLICATION FOR INTERNATIONAL ASSOCIATE MEMBERSHIP

**ELIGIBILITY REQUIREMENTS:** An individual, proprietorship, partnership or corporation which supplies equipment, products or services to the automotive industry. Any other organization may be approved for associate membership by the board of directors.

- Please complete and include the following items with payment:
1. Company catalog or price sheet
  2. Company letterhead or invoice
  3. Copy of certificate of product liability insurance

## COMPANY INFORMATION

Company Name \_\_\_\_\_ Date business started \_\_\_\_\_

Contact Person (one name only) \_\_\_\_\_

Business Address \_\_\_\_\_

City, Province, Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Federal ID Number \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Other trade associations you are affiliated with: \_\_\_\_\_

Products and/or services offered to wholesalers: \_\_\_\_\_

**Please check the appropriate categories for listing in the AERA Membership Directory:**

### SERVICE GROUP

- BP – Business Press
- CP – Computer Services
- CS – Core Supplier
- ED – Engine Distributor / Engine Component Distributor
- M – Importer
- MP – Manual Publisher
- RM – Remanufacturer
- SS – Shop Supplies
- VT – Vocational Training
- WD – Warehouse Distributor
- Other

### MANUFACTURER'S GROUP

- CM – Chemical Adhesive Mfr.
- EM – Equipment Mfr. / Supplier
- MR – Manufacturer's Rep. / Agent
- PM – Parts Mfr. / Supplier

## AERA MEMBERSHIP DUES

- Manufacturer's Rep / Agent or Business Press.....\$439 (\$36.58/month)
  - Wholesale Distributor, Manufacturer, Remanufacturer, Core Supplier, or Service Organization
- Automotive Sales:**
- \$0 - 1,000,000 .....\$639 (\$53.25/month)
  - \$1,000,000 - 3,000,000 ...\$739 (\$61.582/month)
  - Over \$3,000,000 .....\$839 (\$69.92/month)

## PAYMENT MUST ACCOMPANY APPLICATION

**ENTIRE AMOUNT ENCLOSED:** \$ \_\_\_\_\_  **MONTHLY PAYMENT PLANS AVAILABLE:** Contact AERA for details.

**CREDIT CARD:**  VISA  MasterCard  American Express  Discover  **CHECK:** Please make check payable to **AERA**

Cardholder Name (please print) \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

**I attest that my firm meets the above requirements and give AERA permission to verify the information.**

Signature \_\_\_\_\_ Title \_\_\_\_\_

### ★ RECOMMENDED FOR MEMBERSHIP BY:

**Send application and payment to:** AERA, 875 Feinberg Court, Suite 106, Cary, IL 60013 USA. Or — fax your completed application with payment to 888-329-2372 (toll-free) or 815-526-7601. You may also apply online at [www.aera.org](http://www.aera.org). If you are already an AERA member, please give this application to a friend. Call AERA toll-free 888-326-2372 (or direct 815-526-7600) with any questions.