



2009 Membership Application

Company Information

Company Name / Institution: _____

Company Address: _____

Telephone: _____

Fax: _____

Website: _____

Security Business License #: _____

Contact Information

A separate email address is required for each additional employee

Main

Contact: _____

Email Address: _____

Membership Fees *(please refer to attached sheet for detailed information on membership categories)*

Voting Members

	Annual Fee	Quantity	Total
Locksmith / Security Dealer (includes company plus one licensed employee)	\$305.00		\$ _____
Additional licensed employees (to max of \$120)	\$30.00	X	\$ _____
Institutional / In-house Locksmith	\$150.00		\$ _____
Out of Town Locksmith	\$150.00		\$ _____
Distributor / Wholesaler	\$500.00		\$ _____

Non-Voting Members

Manufacturer, Industry Representative	\$200.00		\$ _____
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Optional

Prepaid Dinner Meetings (Meetings are \$35 per person and are held 5x per year)	\$175.00	X	\$ _____
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Grand Total

Please list the names of all licensed employees in order to issue membership ID cards:

1 _____	6 _____
2 _____	7 _____
3 _____	8 _____
4 _____	9 _____
5 _____	10 _____