

# 2016 MEMBERSHIP APPLICATION



## CONTACT INFORMATION

Agency Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

## MEMBERSHIP OPTIONS (please check one)

Transit System

Call Kim Cella at 314.231.7272 for details.

Transit Partner Member

\$200.00

(Organizations or agencies engaged in activities designed to support public transit.)

Supplier (Vendor) Member

\$300.00

(Persons or corporations engaged in supplying goods or services to the public transit industry.)

Associate Member

\$50.00

(Organizations that use transit to provide service to the organization's clients; or, represent clients who are dependent on public transit. Examples of such organizations include, but are not limited to, social service agencies, sheltered workshops, and advocacy organizations for the disabled; and, other similar organizations.)

Individual Member

\$25.00

(Individual supporters of public transit who are not affiliated with an organization in another membership category.)

## PAYMENT OPTIONS (please check one)

MasterCard       Visa       American Express       Check       Please Invoice

Account #: \_\_\_\_\_

Exp.: \_\_\_\_\_ Three digit security code: \_\_\_\_\_

Name on Card (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Please return by email to [kcella@mopublictransit.org](mailto:kcella@mopublictransit.org) or mail to:

Kim Cella, Executive Director

Missouri Public Transit Association

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