

MEMBERSHIP APPLICATION **USED CAR & ASSOCIATE MEMBERS**

Please use this application to join PAA. Complete and return form to PAA at P.O. Box 2955, Harrisburg, PA 17105-2955.

Company Name: _____

Trading As Name (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

Office Phone #: _____ Fax #: _____

Franchises: _____ / _____ / _____

DIN #(s): _____

Type of Business: _____

Owner's Name: _____ Owner's E-Mail Address: _____

Primary Contact: _____ Position: _____

E-Mail Address: _____

Additional Bulletin Emails

Name: _____ Position: _____ Email Address: _____

Name: _____ Position: _____ Email Address: _____

Name: _____ Position: _____ Email Address: _____

Name: _____ Position: _____ Email Address: _____

Signature: _____ Date: _____

NOTE: All membership dues are based on a fiscal period from October 1 to September 30. Refer to the pro-rated dues schedule below.
Membership dues paid to PAA are NOT DEDUCTIBLE as charitable contributions.

Amount enclosed \$ _____
Make check payable to **PAA**

PRO-RATED DUES SCHEDULE

PRIMARY LOCATION USED CAR, ASSOCIATE	
<u>Month Sent in</u>	<u>Fee</u>
October (12 months)	\$550.00
November (11 months)	505.00
December (10 months)	460.00
January (9 months)	415.00
February (8 months)	370.00
March (7 months)	325.00
April (6 months)	280.00
May (5 months)	235.00
June (4 months)	190.00
July (15 months)	685.00
August (14 months)	640.00
September (13 months)	595.00

BRANCH LOCATION	
<small>(each additional point of ownership)</small>	
<u>Month Sent in</u>	<u>Fee</u>
October (12 months)	\$450.00
November (11 months)	415.00
December (10 months)	375.00
January (9 months)	340.00
February (8 months)	300.00
March (7 months)	260.00
April (6 months)	225.00
May (5 months)	190.00
June (4 months)	150.00
July (15 months)	565.00
August (14 months)	525.00
September (13 months)	490.00