



# Membership Application Solicitud de Membresía

P.O. Box 3474  
Somerton, Arizona 85350  
Office (928) 627-1167  
Fax (928) 627-0545

## COMPANY INFORMATION / INFORMACION DE COMPAÑIA

Company Name  
Nombre de Compañía \_\_\_\_\_

Contact \_\_\_\_\_ Title \_\_\_\_\_  
Contacto \_\_\_\_\_ Título \_\_\_\_\_

Mailing Address  
Direccion Postal \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Codigo Postal \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_  
Telefono \_\_\_\_\_ Celular \_\_\_\_\_

E-Mail \_\_\_\_\_  
Webpage \_\_\_\_\_  
Domicilio de Internet \_\_\_\_\_

Product or Service  
Producto o Servicio \_\_\_\_\_

# of Employees: Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Total \_\_\_\_\_  
# de Empleados: Completo \_\_\_\_\_ Medio Tiempo \_\_\_\_\_

## FREE INTERNET LISTING / LISTADO DE INTERNET GRATUITO

Line 1  
Linea 1 \_\_\_\_\_  
Business or Agency / Negocio o Agencia

Line 2  
Linea 2 \_\_\_\_\_  
Featured Product, Service or Contact Name / Producto, Servicio o Nombre de Contacto

Line 3  
Linea 3 \_\_\_\_\_  
Company Address / Direccion de Compañia

Line 4  
Linea 4 \_\_\_\_\_  
Phone Numbers / Numeros Telefonicos

## BILLING INFORMATION / INFORMACION DE RECIBOS DE COBRO

Company Name  
Nombre de Compañía \_\_\_\_\_

Contact \_\_\_\_\_ Title \_\_\_\_\_  
Contacto \_\_\_\_\_ Título \_\_\_\_\_

Mailing Address  
Direccion Postal \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Codigo Postal \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_  
Telefono \_\_\_\_\_ Celular \_\_\_\_\_

Membership fee is \$80.00 yearly plus a \$25.00 one-time Administrative fee. El costo de membresía es \$80.00 al año mas \$25.00 cobro unico de procesamiento.

MEMBER NUMBER# \_\_\_\_\_

METHOD OF PAYMENT  CASH  CHECK  OTHER \_\_\_\_\_

MEMBERSHIP BY \_\_\_\_\_

DATE \_\_\_\_\_