

ASSOCIATE MEMBERSHIP

Application Form

AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM

Company Information (complete a	ll sections and ret	urn by email to the	e address provided)
Company Name:			
Address:			
City:	State:	Postal Code:	Country:
Phone:		Web Sit	•
Primary Contact Information			
Name:		Title:	
Phone:		Email	:
Secondary Contact Information			
Name:		Title:	
Phone:		Email	:
Accounts Payable Information			
Name:		Title:	
Address:			
City:	State:	Postal Code:	Country:
Phone:		Email	:

Section B (if applicable)

AAMVA may not use the above email addresses in normal conduct of business.

Section C (check appropriate box)

Membership Category

Category I: Associations, not-for-profits, educational institutions, Indian Nations and governments or agencies other than United States, Canada and Mexico. (\$1,210)

Category II: All other business organizations. (\$2,905)

Local Government: Local governmental units of the United States, Canada and the Mexican Federal Governments. (\$825)

Local Government Law Enforcement: Local governmental law enforcement units of the United States, Canada and the Mexican Federal Governments. (\$825)

AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM

Section D

Describe your organization's mission or purpose. Enclose a copy of your most current annual report, mission statement, goals or other documentation that indicates the organization's mission or purpose. Your application will not be processed until documentation is received.

Section E

Provide a description of your organization's products and/or services and how they benefit AAMVA members in motor vehicle administration, law enforcement or identification security. Example: "The ABC Company provides specialty papers for manufacturing titles and other secure information. Safety features include sequential numbering and background security designs. The security features of our product will reduce fraud.") This description will be used in the directory.

Please indicate the directory category you wish your organization to be listed under:						
	Associations		Motor Carrier			
	Automated License Plate Readers		Motor Carrier Technology/Indicia/			
	Biometrics		Production			
	Consulting		Paper/Form Manufacturing			
	Customer Service Solutions Services/ Public Relations		Queuing Solutions Security/Fraud Solutions			
	Document Management		System Modernization			
	Driver Data		Temporary Tags and Handicap Placards			
	Driver Licensing Technology/Card		Vehicle Data			
	Personalization		Vehicle Emissions			
	Driver Safety		Vehicle History			
	Driver Testing		Vehicle Renting And Leasing			
	Electronic Tolling		Vehicle Safety			
	Government		Vehicle Titling and Registration—			
	Insurance		Technology/Indicia/Production			
	Insurance Verification		Vehicle Electronic Titling and Electronic			
	Ignition Interlock		Records Management			
	Knowledge Testing		Vehicle Electronic Lien and Title (ELT)			
	License Plate Production		Vehicle Electronic Registration and Title (ERT)/Electronic Vehicle Registration (EVR)			

Section F

If your organization collects motor vehicle-related data, specify how the data is stored, how it is used and if it is made available to other persons or organizations.

A A M V A A S S O C I A T E M E M B E R S H I P A P P L I C A T I O N F O R M

Section G

List other motor vehicle and/or law enforcement agencies, associations or organizations with which your organization is affiliated.

Section H

Within the past (5) years, has any administrative or judicial body made a finding or issued an order concerning your organization or to your organization that pertains to conduct that has relevance to the ongoing activities or mission of AAMVA?

□ No □ Yes

If "YES" please explain:

Section I

Eligibility Certification (please check to the left of <u>each</u> statement)

Our organization has read and is supportive of AAMVA's Mission and Vision.

Our organization has read and agrees to AAMVA's Bylaws.

Our organization has read and agrees to AAMVA's Vendor Code of Conduct Policy.

When conducting business with AAMVA, its members and affiliates, representatives of our organization will abide by AAMVA's commitment to respectful conduct and an environment free from discrimination and harassment.

Our organization will not use its affiliation with AAMVA and its affiliates or any logo, symbol or other identifying characteristics of AAMVA in conjunction with any advertising or promotion for any product or service without the specific written approval of AAMVA.

Our organization is not prohibited and does not have employees prohibited from conducting business with the United States or Canadian federal governments or jurisdictions in either country and our organization does not conduct business or provide any materials to any foreign terrorist organization (FTO).

I certify that our	organization meets the eligibility certification requirements	listed	above:
Name:			Date:

AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM INSTRUCTIONS

Please complete all sections of the application form. AAMVA will accept applications for associate membership at any time during the year. Your application will not be processed until all information requested has been received.

Membership Dues	Category I	Category II	Local Government	Local Government Law Enforcement
'	\$1,210	\$2,905	\$825	\$825

Membership Categories

- Category I: Associations, not-for-profits, educational institutions, Indian Nations and governments other than United States, Canada and Mexico.
- Category II: All other business organizations.
- Local Government: Local governmental units of the United States, Canada and Mexico.
- Local Government Law Enforcement: Local governmental law enforcement units of the United States, Canada and the Mexican Federal Governments.

Applications in a Pending Status

While your application is in a pending status, AAMVA will offer your organization member rates for registration, exhibit fees and advertising. No other AAMVA member benefits will be extended until the Board of Directors approves your application.

Disapproved Applications

If an application is NOT approved, we will contact you by telephone or email with additional information.

Completing the Application Form

Please complete all sections of the application form. Your application will not be processed until all information requested has been received, Once approved, we will contact you regarding the appropriate dues payment.

Section A: Company and Contact Information

Please provide your formal company name and headquarters address including post office box number or suite number if applicable. Include your organization's Web site address. The primary contact should be the person AAMVA should send material to when one per organization is distributed (e.g., surveys). The dues contact person will receive AAMVA dues renewal notices.

Section B: Information

Check the box if you do **NOT** want AAMVA to email business documents, meeting notices, dues notices and other material to your employees.

Section D: Organization Mission

Describe your organization's mission or purpose.

Section E: Organization Description

Provide a concise description of your organization's products and/or services and how they would benefit AAMVA members in regard to motor vehicle administration, law enforcement or identification security.

Section F: Data Collection Information

If your organization collects motor vehicle-related data, indicate if the data is stored, how it is used and if it is made available to other persons or organizations.

Section G: Organization Memberships

List all other motor vehicle and/or law enforcement agencies, associations or organizations with which your organization is affiliated.

Section H: Organization Finding/Judgments

Circle YES or NO to indicate if any administrative or judicial action has been taken against your organization that would imperil your eligibility for membership. If YES write a brief explanation in the space provided.

Section I: Eligibility Certification

Check the box of each statement to certify that you have read and understand each eligibility certification requirement. In addition, you must sign and date the application certifying that your organization meets the requirements.

Application and Payment

Submit application via email to associatemembership@aamva.org

Please contact AAMVA at:

associatemembership@aamva.org or by telephone at 703-522-4200 should you have additional questions.

Please complete all sections of the application form. Your application will not be processed until all information requested has been received. Once approved, please submit the appropriate dues payment.