



**AVIATION DISTRIBUTORS AND MANUFACTURERS ASSOCIATION**  
**100 North 20<sup>th</sup> Street, 4<sup>th</sup> Floor**  
**Philadelphia, PA 19103**

**APPLICATION FOR MEMBERSHIP IN THE ASSOCIATE MEMBER DIVISION**

The undersigned, being engaged in the business providing publications to those who manufacturer and or distribute aviation parts, equipment and supplies, hereby applied for Active Membership in the Associate Division of the Aviation Distributors and Manufacturers Association and agrees to subscribe to its Constitution and By-Laws.

Name of Company: \_\_\_\_\_

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

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

Date: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Email Address: \_\_\_\_\_

I understand that by providing the email address above, on behalf of the company/ organization specified above, I am authorized to and hereby consent for the company/ organization to receive emails sent by or on behalf of the AVIATION DISTRIBUTORS AND MANUFACTURERS ASSOCIATION.

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Publisher: \_\_\_\_\_

Editor: \_\_\_\_\_

Additional contacts to receive ADMA correspondence:

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

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

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

How long has your publication been in existence? \_\_\_\_\_

What is your annual circulation? \_\_\_\_\_

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FOR ADMA USE ONLY

Approved by the Board of Directors:

Date: \_\_\_\_\_

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

Executive Director