



AVIATION DISTRIBUTORS AND MANUFACTURERS ASSOCIATION

100 N. 20th STREET 4th Floor
PHILADELPHIA, PA 19103
(215) 564-3484
FAX (215) 963-9784

APPLICATION FOR MEMBERSHIP IN THE MANUFACTURERS DIVISION

The undersigned, being engaged in the business of manufacturing or assembling of aviation parts, equipment and supplies, hereby applies for Active Membership in the Manufacturers 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: _____

Telephone Number: _____ FAX Number: _____

Email: _____

Signature: _____ Date: _____

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.

President: _____ Partners: _____

Email: _____

Vice President: _____ Others (With titles): _____

Email: _____

Secretary: _____

Treasurer: _____

General Manager: _____

Corporation

Partnership

Other

Do you operate a factory for the manufacture, re-manufacture or assembly of aviation parts, accessories, supplies, equipment or other products or materials essential to the operation and maintenance of aircraft?

Yes No

*Do you now market, or plan within twelve (12) months to market, your aviation products through wholesale distributors?

Yes No

List names and locations of your primary wholesale distributors:

Name of Distributor	Location
_____	_____
_____	_____
_____	_____
_____	_____

Do your current assets exceed your current liabilities? Yes No

What annual percentage of aftermarket sales of aviation parts, supplies and accessories is to wholesale distributors?

_____ %

*If you currently do NOT market through distributors, please submit a statement of your "intent or plan" to market through distribution.

List Principal Aviation Products Which Your Company Produces

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

How many years has your company been in business? _____

How many years has your company manufactured aircraft parts, accessories, supplies, equipment or other products or materials essential to the operation and maintenance of aircraft? _____

Applicant is attaching a copy of its latest audited financial statement of verification of sales figures and other financial data by a Certified Public Accountant, as a requirement of Membership. This will be maintained in total confidence by the ADMA staff.

CERTIFICATION: I certify that the foregoing information is correct according to the minute books and the financial records, books and accounts of the applicant company.

It is understood that the applicant must meet and continue to meet the ADMA eligibility requirements for the duration of its membership.

Signature: _____ Firm: _____
(Certified Public Accountant)

Title: _____ Date: _____

NOTE: If applicant company does not employ or utilize the services of an outside Certified Public Accountant, and if a letter to the effect is submitted with this application, the signature of the company treasurer or chief accounting officer will be accepted.

Company: _____

Official: _____

Referred by (if applicable): Name: _____ Company: _____

FOR ADMA USE ONLY

Approved by Board of Directors

Date: _____ Signature: _____
Executive Director