



AVIATION DISTRIBUTORS AND MANUFACTURERS ASSOCIATION
100 North 20th Street, 4th 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.

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? _____

FOR ADMA USE ONLY

Approved by the Board of Directors:

Date: _____

Signature: _____

Executive Director