



# APPLICATION FOR GOVERNMENT MEMBERSHIP

**ELIGIBILITY REQUIREMENTS:** Any government body that maintains adequate facilities for installation, repair or rebuilding of engines for its own use.

- Please complete and include your government’s letterhead with payment.

Government Name \_\_\_\_\_

Contact Person (one name only) \_\_\_\_\_

Address \_\_\_\_\_

City, State / Province, Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

List functions performed by government departments \_\_\_\_\_

Number of technicians / machinists employed \_\_\_\_\_

Other trade associations you are affiliated with: \_\_\_\_\_

Sponsored by: \_\_\_\_\_

### AERA MEMBERSHIP DUES

One-time annual payment or monthly payment plan. All prices USD.

Government or Government Affiliated Agency .....  \$580  \$48.33 (monthly)

**NOTE:** Service fees are not deductible as charitable donations for federal income tax purposes. Service fees may be deductible as a business expense. If in doubt, please consult your tax advisor.

### PAYMENT MUST ACCOMPANY APPLICATION

**ENTIRE AMOUNT ENCLOSED:** \$  **MONTHLY PAYMENT PLANS AVAILABLE:** Contact AERA for details.

**CREDIT CARD:**  VISA  MasterCard  American Express  Discover  **CHECK:** Please make check payable to **AERA**

Cardholder Name (please print) \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

**I attest that my firm meets the above requirements and give AERA permission to verify the information.**

Signature \_\_\_\_\_ Title \_\_\_\_\_

### ★ RECOMMENDED FOR MEMBERSHIP BY:

**Send application and payment to:** AERA, 875 Feinberg Court, Suite 106, Cary, IL 60013 USA.

Or, fax your completed application with payment to 888-329-2372 (toll-free) or 815-526-7601. You may also email to **info@aera.org** or apply online at **www.aera.org**. Call AERA toll-free 888-326-2372 (or direct 815-526-7600) with any questions.