



Bay Area Manufacturers Association

P.O. Box 15208
Clearwater, FL 33766
Phone (727) 536-5809

Please complete and sign the following form and mail it, along with appropriate payment to the address listed above.

Date:

Company Name:

Mailing Address:

City, State, Zip Code:

Street Address:

City, State, Zip Code:

Telephone:

Fax:

E-mail:

Web Site:

Number of Employees:

Does your company:

Import only

Export only

Import and Export

Neither

Officials Representing the Company

Name:

Title:

Alternate:

Title

Other Information

Year Established

Nature of Work

Business Keywords

Recommended by:

Type your name:

Signature

Annual Dues:

Manufacturers \$350

First Year Associate \$600

Second Year Associate \$450

Third Year Associate \$350

Education Partner \$0

A check for annual dues must accompany this Application.