

Membership Application

MAILING: PO Box 89008 | Sioux Falls, SD 57109-9008 SHIPPING: 3801 S. Kiwanis Ave. | Sioux Falls, SD 57105

PHONE: 605-334-8871 | FAX: 605-334-1938

APPLICATION FOR ASSOCIATE MEMBERSHIP

(Membership for businesses associated with the trucking industry)

			v	
Date				
Contact				
Company Name				
Mailing Address				
City		State Zi	.p	
Street Address (if different)				
Phone Number:	Fax Number:	Fax Number: Toll Free Number:		
Email Address		publish in directory 🔲 yes 🔲 no		
Web Address		publish in directory 🖵 yes 🗀 no		
The "SDTA Trucking News" is available both as hard copy cally be sure to include your of Type of Service: (circle top 3 can	y and electronically. If you email address in the space	wish to receive the "SDTA T	rucking News" electroni-	
Attorney	Financial	Parts/Sales/Service	Trailer Dealer	
Bonds	Fuel Tax	Permits	Truck Dealer	
Broker	Insurance	Petroleum Supplier	Truck Driving School	
DOT Inspections	Leasing	Refrigeration	Truck Stop	
Drug/Alcohol Testing	Legal Services	Special Equipment	Other:	
Engine Sales/Service	Manufacturer	Tire Dealer		
	SCHEDULE OF Minimum Membe	ANNUAL DUES: ership \$190.00		
Recommended by:		Membership Dues Enclosed:		
Signature of Applicant:				
Note: Additional employees	s are able to receive con	ies of mailings from SDTA	, by paving an Employee	

Note: Additional employees are able to receive copies of mailings from SDTA by paying an Employee Membership fee of \$85 (*per employee*). This is in addition to the initial membership fees paid by the company. Call SDTA for details.