



# Precision Machined Products Association

6880 West Snowville Road – Suite 200

Brecksville, Ohio 44141

Phone: (440) 526-0300 Fax: (440) 526-5803

\_\_\_\_\_  
**Company Name**

\_\_\_\_\_  
**Date**

hereby applies for membership in the Precision Machined Products Association. It is agreed that after one year from the above date, applicant will continue subject to withdrawal of membership in accordance with the PMPA Code of Regulations.

The following classification of membership is applied for:

**Technical Membership:** Any domestic or foreign supplier to the precision machined products industry who meets the established criteria for membership.

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Phone & Fax Number)

\_\_\_\_\_  
(City, State/Province, Zip/Postal Code)

\_\_\_\_\_  
(Website)

PMPA Dues are based on sales to North American machined products manufacturers. Please mark your membership class:

	Sales Range	Annual Dues
<input type="checkbox"/>	Up to \$1,500,000	\$1,250
<input type="checkbox"/>	\$1,500,001 to \$2,500,000	\$2,250
<input type="checkbox"/>	\$2,500,001 to \$4,000,000	\$2,700
<input type="checkbox"/>	\$4,000,001 to \$10,000,000	\$3,075
<input type="checkbox"/>	\$10,000,001 to \$20,000,000	\$3,375
<input type="checkbox"/>	\$20,000,001 to \$40,000,000	\$3,675
<input type="checkbox"/>	Over \$40,000,000	\$4,125

Billing Address is same as Mailing Address above.

\_\_\_\_\_  
(BILLING Address)

\_\_\_\_\_  
(BILLING City, State/Province, Zip/Postal Code)

To pay by American Express, VISA, MasterCard or Discover, please complete the following:

**Cardholder Name:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Card Type:** \_\_\_\_\_

Company representative authorized to vote on or answer questions concerning Association matters and receive Association mail:

\_\_\_\_\_  
(Name and title of certified representative; only one individual)

\_\_\_\_\_  
(Email address of certified representative)

Other Key Company Contacts:

Name	Title	Email

**\*RETURN completed form to PMPA via email: [membership@pmpa.org](mailto:membership@pmpa.org)**

UPDATED: 2/4/2019 S:/Public/Membership/3-DForms