



VOTING MEMBERSHIP (INSIDE THE U.S.)

AFFILIATE MEMBERSHIP (OUTSIDE THE U.S.)

Application for Membership

COMPANY NAME: _____ # OF EMPLOYEES: _____

CONTACT NAME: _____ TITLE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ COUNTRY: _____ TOLL-FREE #: _____

PHONE: _____ CELL: _____ FAX: _____

EMAIL ADDRESS: _____ WEBSITE: _____

CATEGORY (SEE USSA WEBSITE): _____ YEAR FOUNDED: _____

_____ % OF MARINE BUSINESS _____ % OF MARINE BUSINESS IN THE U.S. FEI #: _____

Sponsors (Must be a current USSA Member):

COMPANY	CONTACT	PHONE

MUST HAVE 2 SPONSORS

At which boat shows do you exhibit:

1: _____ 3: _____

2: _____ 4: _____

Interests with USSA:

ADVOCACY NETWORKING ADVERTISING BOAT SHOWS COMMITTEES CAPTAIN'S BRIEFINGS

OTHER _____

HOW DID YOU HEAR ABOUT USSA? WEBSITE BOAT SHOW WORD OF MOUTH NETWORKING EVENT

OTHER _____

Payment:

CHECK ENCLOSED CREDIT CARD: VISA MASTERCARD AMERICAN EXPRESS

CARD #: _____

NAME ON CARD: _____

BILLING ADDRESS: _____

AMOUNT: \$ _____ CSV: _____ EXP. DATE: _____

SIGNATURE: _____

PLEASE RETURN VIA EMAIL AT INFO@USSUPERYACHT.COM OR VIA FAX AT 954.523.0607

OFFICE USE ONLY

RECEIVED _____ MEMBERSHIP APPROVED _____ BOARD APPROVED _____ FINAL APPROVAL _____