

PENNSYLVANIA MOTOR TRUCK ASSOCIATION

910 Linda Lane
Camp Hill, PA 17011-6409
Phone: 717-761-7122
800-382-1373
Fax: 717-761-8434
www.pmta.org

2010 MEMBERSHIP APPLICATION

*Application is hereby made for membership in theChapter of the
Pennsylvania Motor Truck Association.*

Date.....

Firm Name.....

Address..... County.....

City..... State..... Zip.....

Representative's Name..... Title.....

Telephone Number ()..... E-mail.....
(print clearly)

Fax Number ()..... Nature of Business.....

*Total Number of Trucks and/or Power Units (over 10,000 GVW)

TYPE OF MEMBERSHIP	PLEASE INDICATE TYPE OF EQUIPMENT OPERATED
<input type="checkbox"/> Private	____ Dry Van
<input type="checkbox"/> For Hire	____ Refrigerated
<input type="checkbox"/> Trade	____ Flatbed
<input type="checkbox"/> Manufacturer	____ Dump
<input type="checkbox"/> Active Retired	____ Tank
<input type="checkbox"/> Associate	Other _____

Please specify

Proposed by: _____

Signature of Applicant _____

How did you hear about our association? _____