



P.O. Box 30438 • Bethesda, MD 20824-0438
Phone (301) 907-8181 • Fax (301) 907-9148

COMMERCIAL USER MEMBERSHIP APPLICATION

CONTACT INFORMATION

Company Name _____
Primary Contact _____
Address _____
City, State, Zip _____
Phone _____
Fax _____
E-mail _____
Website _____

Year company established _____
Additional Contact _____
E-mail _____
Additional Contact _____
E-mail _____
Additional Contact _____
E-mail _____

DUES STRUCTURE

FOREIGN MEMBER

- | Dues | Annual Number of Pyrotechnic Productions |
|----------------------------------|------------------------------------------|
| <input type="checkbox"/> \$1,000 | 1- 60 Productions |
| <input type="checkbox"/> \$1,500 | 61 – 120 Productions |
| <input type="checkbox"/> \$2,500 | 121 – 180 Productions |
| <input type="checkbox"/> \$5,000 | 181 – 360 Productions |
| <input type="checkbox"/> \$7,500 | 361 or more Productions |

Commercial User Member dues are based on the number of pyrotechnic productions conducted on an annual basis.

TRADE REFERENCES

Please list three APA member companies who are familiar with your business and can verify the statements made in this application. If you cannot provide three references, please contact the APA for assistance.

Company Name / Name of Contact

- 1 _____ / _____
- 2 _____ / _____
- 3 _____ / _____

NATURE OF BUSINESS

(Please indicate the company's primary nature of business)

(check all that apply)

Amusement/Theme Park _____
Theatrical Production _____
Other _____ Specify _____

PAYMENT INFORMATION

Card Holders Name _____
CC # _____
Exp Date _____

Check Enclosed Credit Card: MC VISA AMEX

Total enclosed/to be charged \$ _____