



## Membership Application

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name & Title of Representative: \_\_\_\_\_

Telephone (if different): \_\_\_\_\_

Fax (if different): \_\_\_\_\_

E-Mail: \_\_\_\_\_ Application Date: \_\_\_\_\_

The Association's dues are normally paid July 1. A prorated dues schedule is available if you are joining at another time of year. Call for information.

### Indicate membership type below:

- |   |  |
|---|--|
| <input type="checkbox"/> Urban, Fixed Route (fee assessed based upon operating expense) | <input type="checkbox"/> Large Government (\$2000 per year)                    |
| <input type="checkbox"/> Business Members (\$400)                                       | <input type="checkbox"/> Small Government/ Non-state agencies (\$250 per year) |
| <input type="checkbox"/> Specialized/Rural (\$150 per year)                             | <input type="checkbox"/> Individual/Student Associate (\$50 per year)          |

Mail the application along with a check made payable to the **Georgia Transit Association** to:

Georgia Transit Association  
P.O. Box 920490  
Norcross, GA 30010-0490  
Phone: (770) 734-0761  
Fax: (404) 420-2720