



APPLICATION FOR MEMBERSHIP

United States Marine Safety Association
5050 Industrial Road, Farmingdale, NJ 07727
Telephone: (732) 751-0102 FAX (732) 751-0508
E-mail usmsa@usmsa.org
Website: www.usmsa.org

Submitted by _____ Title _____

(Check as appropriate) ___ on behalf of my company ___ as an individual

Company _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

E-mail _____ Web Address _____

I am applying for membership in the U.S. Marine Safety Association (USMSA) in the category marked below.

Please provide the information requested below. Indicate all categories that you or your company are involved in. You will be billed at the highest category level.

- MANUFACTURER** - Manufactures or holds approval certification for any marine safety equipment, including life rafts, lifeboats, rescue boats, EPIRBs, immersion suits, personal flotation devices (PFD's) fire protection equipment and products, survival provisions of all types, safety and survival electronics or any other product which could be deemed for use in the marine safety industry. This category also includes companies who are owned or partly owned by companies, which meet the above criteria.

- SECONDARY MANUFACTURER** - Manufactures component parts; that is, items not used by themselves for marine safety, but rather used to manufacture or enhance marine safety items. To be considered secondary, the product manufactured must be used exclusively as a component of a finished product. Examples include: fabric manufacturers, fabric coaters, manufacturers of buoyant foams and inflation valves.

- SALES / SERVICE ORGANIZATION** - Provides sales, rental and/or service for any aspect of the marine safety industry, including life raft service stations, fire protection, marine retail stores, etc.

- ASSOCIATE** - Includes marine safety professionals, safety trainers, marine consultants and manufacturers' reps.

- SUBSCRIBER** – Non-Voting category - Open to any person, organization or agency that cannot be a voting member, but wishes to receive member communications and information.

DUES CATEGORIES

<u>Member Class</u>	<u>Yearly Dues</u>
Manufacturer	\$1335.00
Secondary Manufacturer	\$ 650.00
Service Organization	\$ 650.00
Associate	\$ 445.00
Subscriber	\$ 195.00
<i>Additional branch listings \$100.00 per branch</i>	

For Individuals~

Description of professional activity: _____

For company applications~

Principal product/service provided: _____

Other products/services offered: _____

Referring USMSA member: (optional) _____

New member dues are paid on a prorated basis. The membership year is July 1 - June 30

PLEASE NOTE

Dues are to be paid on a prorated basis, i.e.:

(Dues Amount/12) x (# of months from time application is sent until July 1)

For example, if a *manufacturer* were to join as of January 1, dues would be:

(\$1335/12 months) x 6 months=\$ 667.50

***Assume all memberships begin at the start of the month.

***Enclose dues with application.

I understand that the Board of Directors will review my application for membership based on the requirements contained in the Bylaws adopted by the Board. I agree to make available further information upon request by the Board, should such information be necessary to determine my membership category. I further understand that my application for membership will be reviewed by USMSA upon receipt of my pro-rated dues.

As to Branches, the definition of a branch requires that it be "brick & mortar" and be owned by the company under which it is listed in the directory.

Signature _____

Title _____

Date ____/____/____ Prorated Dues Enclosed: \$ _____

Credit Card - V MC AMEX # _____ Exp. Date ____/____/____

Please return application including a check or credit card information for the appropriate dues to:

U.S. Marine Safety Association
5050 Industrial Road, Farmingdale, NJ 07727 USA
Overseas interests, please call or e-mail for wire transfer information