



REGULAR MEMBERSHIP APPLICATION

Company Name: _____ Phone: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip: _____

Principal Representative: _____ Email Address: _____

Alternate Representative: _____ Email Address: _____

Company Website: _____

Company Data:

1. Date the company first began manufacturing slings, tie downs and/or load securement products or in the manufacture of synthetic webbing for slings and/ or tie downs. If less than 2 years, a certificate of product liability insurance in a minimum amount of \$1,000,000 must be provided with this application.

Month: _____ Year: _____

To qualify for Regular Membership you must manufacture within your company. If you distribute finished goods please obtain an application for Associate Membership.

2. What type of product does your company manufacture? (Please check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Synthetic Web Slings | <input type="checkbox"/> Synthetic Round Slings | <input type="checkbox"/> Non-Synthetic Load Securement Products |
| <input type="checkbox"/> Synthetic Web Tie Downs | <input type="checkbox"/> Synthetic Webbing | (i.e. load binders, tie down chains, etc.) |

Sponsors:

Membership in WSTDA requires applicant to be sponsored by two members of WSTDA.

Sponsor: _____ Company: _____

Sponsor: _____ Company: _____

Annual Dues:

| | | |
|--------------------------------|-----------------|------------|
| Annual Specified Product Sales | Up to \$500,000 | \$1,000.00 |
| | Over \$500,000 | \$2,200.00 |

Enclosed is my check for \$ _____

This application must be accompanied by a check payable to the Web Sling & Tie Down Association (WSTDA) in the amount of one full year's membership dues, fully refundable if application is denied. Second year dues will be prorated based on month membership begins.

Our firm applies for Regular Membership in the Web Sling & Tie Down Association. I certify that this firm is actively engaged in the manufacturing of synthetic web slings, round slings, tie downs or load securement products, and/or webbing. All information contained in this application is true and accurate. The undersigned does also agree to the prompt payment of all association dues and assessments when due. Upon membership approval by the Board of Directors, the undersigned does agree to abide by and subscribe to the WSTDA Bylaws.

Signature: _____ Date: _____

(Revised Oct. 2008)

Please return this membership application along with your payment to: