



# ASSOCIATE 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 or distributing finished goods and/or secondary component materials and/or supplies, such as fibers, thread and hardware, directly or indirectly related to the slings and/or tie down industries. Associate membership may include manufacturers of testing apparatus, sewing machines and looms.

Month: \_\_\_\_\_ Year: \_\_\_\_\_

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

Yarn                       Hardware                       Other (Please provide description below)  
 Thread                       Production Machinery                      \_\_\_\_\_

### 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 Associate Membership in the Web Sling & Tie Down Association. I certify that this firm is actively engaged in manufacturing or distributing finished goods and/or secondary component materials and supplies, directly or indirectly, related to synthetic web slings, round slings, tie downs and/or webbing; and/or the manufacture of testing apparatus, sewing machines or looms. 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:

WSTDA \* 2105 Laurel Bush Road, Suite 200 \* Bel Air, MD 21015 \* Phone: 443-640-1070 \* Fax: 443-640-1031  
Email: [wstda@ksgroup.org](mailto:wstda@ksgroup.org) \* Website: [www.wstda.com](http://www.wstda.com)