



2012 MEA MEMBERSHIP APPLICATION

Company Name: _____

Mailing Address: _____

City: _____

Phone Number: _____

Fax Number: _____

Website: _____

Products Manufactured: _____

Company Representative/Title: _____

Phone Number: _____

Email: _____

Company Alternate/Title: _____

Phone Number: _____

Email: _____

MEA FACTS (Strictly Confidential - data consolidated for all MEA companies):

Please provide latest annual data for:

Number of Employees: _____

Sales Revenue: _____

Capital Expenditures: _____



2012 Dues INVOICE

Annual Dues - \$325.00: _____

Legislative - \$1.00 per employee: _____

Total Remitted: \$ _____

Remit payment to:

**MEA
PO Box 11015
Fort Smith, AR 72917**

**If you have any questions please contact Greg Boschert at
fsmea_president@yahoo.com**