



APPLICATION FOR MEMBERSHIP

YES! It is important to be to be recognized as a professional! Enclosed are my annual dues to ensure that my business has all the advantages IADAC/NIADA provides to put me at the forefront of my profession.

By completing this form, I am consenting to and giving IADAC/NIADA, its affiliates and subsidiaries, my permission to (until I give written notice to discontinue) contact me and provide information to me at the mailing and e-mailing addresses, telephone and fax numbers I have provided. I certify that (I am/we are) eligible for membership in IADAC. I understand that a portion of my dues will be used for lobbying activities as defined by the Revenue Reconciliation Act of 1993. It is estimated that the percentage used for such purposes will be 22.8%. This portion of my dues is not deductible as ordinary and necessary business expense. Contributions and/or gifts are not deductible as charitable contributions for federal income tax purposes.

Member Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone _____ Cell Phone/Pager: _____ Fax: _____

E-Mail: _____ Website: _____

Recruited by: _____

I agree upon the signing of this application and if accepted as a member, to uphold the Bylaws, its Code of Ethics and all, state and federal laws pertaining to the automobile business.

Signature (Required) _____

MEMBERSHIP CATEGORIES:

\$299 – Regular Member: Regular membership is limited to any sole proprietorship, partnership or corporation which is engaged in buying and selling motor vehicles as a principal part of its business; holds a valid new, used or wholesale motor vehicle dealer’s license issued by the California Department of Motor Vehicles; and adheres to the Code of Ethics of this Association.

Dealer in: Used New Other (describe): _____

License #: _____

\$299 – Associate Member: Associated membership is limited to any sole proprietorship, partnership or corporation which is engaged in business related to or associated with motor vehicle dealers; has an established place of business in California; does not hold a new, used or wholesale motor vehicle dealer’s license issued by the California Department of Motor Vehicles; and adheres to the Code of Ethics of this Association.

PAYMENT OPTIONS:

Dues: \$ 299

Scholarship Donation (optional): \$ _____

GRAND TOTAL: \$ _____

Charge A/R Annually for Dues _____ (please initial).

Check made payable to IADAC enclosed. Returned checks will be subject to a \$25 service fee.

Please charge my (circle one); VISA MASTERCARD (Sorry, we do not accept AMEX or Discover)

Card Number: _____ Exp. Date: _____ Security Code: _____

Signature _____