



NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION

CORPORATE MEMBERSHIP

APPLICATION

Name _____ Title _____

Company Name _____

Mailing Address _____

City _____ State _____ ZIP Code _____

Email Address _____ Telephone: Work Cellphone

Description of Business _____

I, the undersigned, am signing up for a one-year NATCA Corporate Membership, and agree to pay the annual membership dues as indicated below. I also agree NATCA can publish my name, city and state in a directory or other materials as appropriate. As a NATCA Corporate Member, I support air traffic controllers, the aviation industry and initiatives that move their issues and concerns forward.

Signature _____ Date _____

Choose one of the following Corporate Member Categories:

Corporate Member – General: \$500 per year

Corporate Member – Premium: \$1,250 per year

Method of payment: Check Make checks payable to: NATCA

Credit card: MasterCard Visa AMEX Discover

Card Number _____ Expiration Date _____

Please remit this form and payment to:
NATCA - ATTN: Corporate Membership
1325 Massachusetts Avenue, N.W.
Washington, DC 20005
Fax 202-380-9118

FOR ASSOCIATION USE ONLY

Date Received: _____ Date Entered: _____ Initials: _____