

APPLICATION FOR MEMBERSHIP

Application is hereby made for membership. Our Company is currently a member in good standing of MHI. If approved for membership, applicant agrees to abide by the By-Laws/Rules and Regulations as may be amended, and make timely payments of dues and assessments. Please type or print clearly when completing the application below.

Name of Corporation			
Street Address			
City	·	State	Zip Code
Telephone Number		Fax Number	
Internet Address (ww	w.)		
The principal types of	equipment we manufacture a	re as follows (use additiona	l pages as required):
List address of main m	nanufacturing facility, if differe	nt from above address:	
Persons who will repr	esent the applicant if approve	d are:	
Membership Delegate):		
Name		Title	
Phone	Fax	E-Mail	
Membership Alternate	e :		
Name		Title	
Phone	Fax	E-Mail	
Engineering Delegate	(if appropriate):		
Name		Title	
Phone	Fax	E-Mail	
Name of person autho	rizing application who verifies	that the facts set forth are	true and correct:
Title	Signature	9	Date

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