

ITS AMERICA Membership Application

General Information

Company Name: _____

Company Address: _____

City _____ State _____ Postal Code _____

Phone _____ Fax _____ Website _____

Your Representatives to ITSA

The contact information you provide will appear in ITS America's member-only online directory unless otherwise specified.

Please check box if contact is NOT to receive ITS America correspondence.

Primary Contact _____ Title _____ Phone _____ Email _____

Primary Contact Business Address (if different from above) _____ City _____ State _____ Postal Code _____

Administrative Contact _____ Title _____ Phone _____ Email _____

Administrative Contact Business Address (if different from above) _____ City _____ State _____ Postal Code _____

Government Relations Contact _____ Title _____ Phone _____ Email _____

Government Relations Contact Business Address (if different from above) _____ City _____ State _____ Postal Code _____

Marketing Contact _____ Title _____ Phone _____ Email _____

Marketing Contact Business Address (if different from above) _____ City _____ State _____ Postal Code _____

Public Relations Contact _____ Title _____ Phone _____ Email _____

Public Relations Contact Business Address (if different from above) _____ City _____ State _____ Postal Code _____

Member Profile:

A. Business Environment: _____ Academic _____ Consulting _____ Government _____ Manufacturer _____ Service

B. Areas of Expertise: (choose all that apply) _____ Archived Data Management _____ Commercial Vehicle Operations
 _____ Emergency Management _____ Maintenance & Construction Management _____ Public Transportation
 _____ Traffic Management _____ Traveler Information _____ Vehicle Safety

C. How many years have you been in the ITS industry? _____ 3 yrs. or less _____ 4 - 8 yrs. _____ 9 - 14 yrs. _____ 15 + yrs.

D. Number of Employees at Location? _____ Under 100 _____ 100 - 249 _____ 250 - 499 _____ 500 - 999 _____ 1,000 +

E. Why are you joining ITS America? _____ Professional Development _____ Member Discounts _____ Networking
 _____ ITS America Publications _____ Keeping up with Industry Standards _____ Recommended by Employer

F. Please provide a company profile or description (50 words or less) via email to membership@itsa.org.

My organization is interested in these Forums (check all that apply) :

- | | |
|---|--|
| <input type="checkbox"/> Commercial Vehicle and Freight Mobility | <input type="checkbox"/> Connected Vehicle Task Force |
| <input type="checkbox"/> Cross-Cutting Issues | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Sustainable Transportation Working Group | <input type="checkbox"/> Transportation Management |
| <input type="checkbox"/> University Research Working Group | <input type="checkbox"/> TC 204 Standards (additional fee) |

Please visit <http://www.itsa.org/industryforums> for more information

Annual Dues

A full year's membership dues must be received to process your application.

You are eligible to receive rebates to use towards state chapter membership depending on your ITS America annual dues level. Please designate the chapter(s) of your choice below.

Organizations Paying \$500 - \$3,999 in dues = 1 - \$100 Chapter Rebate
Organizations Paying \$4,000 - \$10,999 in dues = 2 - \$100 Chapter Rebates
Organizations Paying \$11,000 and higher = 3 - \$100 Chapter Rebates

PRIVATE SECTOR:

<u>Annual Revenue</u>	<u>Dues</u>
\$1 billion or more	\$18,750.00
\$500 million to less than \$1 billion	\$15,675.00
\$250 million to less than \$500 million	\$12,540.00
\$50 million to less than \$250 million	\$ 9,450.00
\$10 million to less than \$50 million	\$ 6,300.00
\$5 million to less than \$10 million	\$ 3,750.00
\$1 million to less than \$5 million	\$ 2,550.00
\$250,000 to less than \$1 million	\$ 1,275.00
Less than \$250,000	\$ 1,050.00
End User-	\$ 3,150.00

(includes trucking companies, railroads, fleet operators, public safety service providers and other companies that purchase ITS products or services but, do not sell or resell them.)

PUBLIC SECTOR:

<u>Category</u>	<u>Dues</u>
Federal Agency	\$3,000.00
State Agency	\$5,000.00
Local/Regional Agency	
• Turnpike, Bridge or Tunnel Authority	\$3,150.00
• Transit Authority	\$1,275.00
• City or County	
Budget > \$1 billion	\$5,000.00
Budget < \$1 billion	\$2,500.00
• Metropolitan Planning Organizations	
Population > 2.5 million	\$5,000.00
Population < 2.5 million	\$2,500.00

Associations

• For Profit Trade Association	\$2,850.00
• Not-for-Profit Trade/Professional Association, Public Interest Group	\$1,275.00

Academic Institution

• College/University	\$1,250.00
• Student	\$ 50.00

Please remit to: ITS America - Membership Dues
 1100 17th Street NW, Suite 1200
 Washington, DC 20036
 Via Fax: (202) 484-3483

CHAPTER DESIGNATION(S):

<input type="checkbox"/> ITS Alaska	<input type="checkbox"/> ITS Minnesota
<input type="checkbox"/> ITS Arizona	<input type="checkbox"/> ITS Nevada
<input type="checkbox"/> ITS California	<input type="checkbox"/> ITS New Mexico
<input type="checkbox"/> ITS Connecticut	<input type="checkbox"/> ITS Committee for a Smart New Jersey
<input type="checkbox"/> ITS Florida	<input type="checkbox"/> ITS New York
<input type="checkbox"/> ITS Georgia	<input type="checkbox"/> ITS Pennsylvania
<input type="checkbox"/> Gulf Region ITS- (AL, LA, MS)	<input type="checkbox"/> ITS Rhode Island
<input type="checkbox"/> ITS Heartland- (IA, KS, MO, NE, OK)	<input type="checkbox"/> ITS Rocky Mountain (CO, ID, MT, UT, WY)
<input type="checkbox"/> ITS Maryland	<input type="checkbox"/> ITS Tennessee
<input type="checkbox"/> ITS Massachusetts	<input type="checkbox"/> ITS Texas
<input type="checkbox"/> ITS Michigan	<input type="checkbox"/> ITS Virginia
<input type="checkbox"/> ITS Midwest- (IL, IN, KY, OH)	<input type="checkbox"/> ITS Washington
	<input type="checkbox"/> ITS West Virginia
	<input type="checkbox"/> ITS Wisconsin

Private Sector Dues Amount: \$ _____

Public Sector Dues Amount: \$ _____

Public Sector Category: _____

Payment: U.S. Dollars only

Check enclosed Check #: _____

Credit Card Type: AMEX MasterCard VISA

Account Number: _____

Expiration Date: _____ Security Code: _____

Name on Card: _____

Authorized Signature: _____