



## 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 (www.) \_\_\_\_\_

The principal types of equipment we manufacture are as follows (use additional pages as required):

\_\_\_\_\_  
\_\_\_\_\_

List address of main manufacturing facility, if different from above address:

\_\_\_\_\_  
\_\_\_\_\_

Persons who will represent the applicant if approved are:

**Membership Delegate:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**Membership Alternate:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**Engineering Delegate (if appropriate):**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**Statistical Delegate:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Name of person authorizing application who verifies that the facts set forth are true and correct:

Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

***Please send completed application to [IndustryGroups@mhi.org](mailto:IndustryGroups@mhi.org)***

**[www.mhi.org/RMI](http://www.mhi.org/RMI)**