## **CARRIER** Membership Application



## COMPANY INFORMATION

Company Name						
Physical Address						
City			State	Zip		
Billing Address (if different from c	above)			•		
City	····,		State	Zip		
Phone		Fa		-16		
	Woh	site URL	27			
USDOT# (required)			the last due		<b>F b b</b>	V
Is your Company on social med		Which platforms:	LinkedIn	Instagram	Facebook	YouTube
If so, what is your company's so		le?				
How did you learn about TXTA?	2					
Main reason for joining						
Private Carrier	For-Hire Carr	Carrier Private & F		or-Hire	# of Drivers	i
SERVICE AREA (check all that app	oly)					
Texas only (Intrastate) Canada		Continental US (Interstate Mexico			US including Alaska & Hawaii International	
Trailer Type (check all that apply)	)		We	e operate Autonor	nous Vehicles	Qty
Dry Van	Flatbed	Intermodal		Refrigera	ted	Crane
End Dump	Hopper	Lowboy/Sp	Specialized Tank			
COMMODITIES HAULED (Please	e check all that ap	oply)				
Ag/Farm Supplies Aggregate / Gravel Alcoholic Beverages Animal Feed Articles-based / Base Metal Basic Chemicals / Chemical Beverages Building Materials Cereal Grains Coal Commodities Dry Bulk Concrete / Rock		Furniture Garbage / Refuse Gasoline General Freight Grain / Feed / Hay Hazardous Materia Household Goods Intermodal / Shippi Liquids / Gases Live Animals / Lives Logs Machinery	ng Containers	Nati New Non Oilfi Oth Oth Pap Pap Pha Plas	ural Gas / Petr ural Sands vsprint / Paper metal Minera eld Equipmen er Agricultural er Foodstuffs er Articles er Products rmaceuticals tics / Rubber cision Instrume	l Products t Products
Construction materials Cranes Crude Petroleum Electronics Fertilizers Fresh Produce Fuel Oils		Meat / Seafood Metal: sheets, coils Metallic Ores Milled Grain Produc Misc. Manufacturin Mixed Freight Motor / Motorized	cts g Products	Refr Text Tow Utili Was	ted Products igerated Food tiles / Leather ring Services ties ste / Scrap od Products	ls

## **CARRIER Membership Application** – page 2

Primary Contact: (required)			
Name:	Title:		
E-mail:			
Billing Contact: (required)			
Name:	Title:		
E-mail:			
Additional Contact: (you can add more contacts if desired once	e membership is fully processed)		
Name:			
E-mail:			
MEMBERSHIP DUES (billed annually on the month you join) Membership dues are based on truck counts do		· · · · · ·	; = \$10,000.
Using the formulas below, please calculate your annual dues. \$455 – Carriers with 1-13 trucks domiciled in TX. List actual number here			
<ul> <li>We have 14 or more trucks domiciled in Texas Total #Trucks Registered to TxDMV/UCR x \$35 per If you have NO terminals or offices in Texas, please This will be your annual dues amount.</li> <li>Total #Trucks (Texas and other states) list number 1-100 Trucks\$455 101-300 Trucks\$</li> </ul>	calculate dues with the fol	lowing formula.	\$ \$
	One-tir	ne administration fee for new me	mbers \$95.00
Optional Contribution:		Legislative Victory Fund	\$
*TXTA members have the option to include donations to a Fund, which supports our advocacy efforts, or to the TXT of your annual billing. Please select Legislative Victory Fu	A Foundation as part	TXTA Foundation	\$
and add the amount you would like to add to your annua		TOTAL AMOUNT DUE: \$	
Please note – TXTA will charge a 3.5% convenience fee for all or TXTA Membership dues can be deducted as a business which is estimated to be 8% – is NOT deductible as an ordinary	expense. Federal tax law cl	hanges require a portion of dues relate	
VERIFICATION			
The aforementioned company hereby agrees to pay the above company provides TXTA written notification at least 30 days prio			e cancelled if the
Name on Card:		Date:	
CC#:	Exp. (mm/yy):	Security Code:	

Mail completed application with payment to the attention of: Texas Trucking Association - Attn: Membership - PO Box 6429, Austin, TX 78762 If paying by credit card, email to ann@texastrucking.com. If you have any questions, please call 512-982-7473. See note about credit card processing fees above.

Signature of Primary Contact: \_\_\_\_\_