

**safe drivers  
safe vehicles  
secure identities  
saving lives!**



# ASSOCIATE MEMBERSHIP

Application Form

**AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM**

**Section A**

*Company Information* (complete all sections and return by email to the address provided)

Company Name:

Address:

City: State: Postal Code: Country:

Phone: Web Site:

***Primary Contact Information***

Name: Title:

Address:

City: State: Postal Code: Country:

Phone: Email:

***Secondary Contact Information***

Name: Title:

Address:

City: State: Postal Code: Country:

Phone: Email:

***Accounts Payable Information***

Name: Title:

Address:

City: State: Postal Code: Country:

Phone: Email:

**Section B (initial here)**

AAMVA may not use the above fax numbers and email addresses in normal conduct of business.

**AAMVA Mission**

Serve North American motor vehicle & law enforcement agencies  
to accomplish their missions

## AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM

### Section C

Describe your organization's mission or purpose. Enclose a copy of your most current annual report, mission statement, goals or other documentation that indicates the organization's mission or purpose. Your application will not be processed until documentation is received.

### Section D

Provide a description of your organization's products and/or services and how they benefit AAMVA members in motor vehicle administration, law enforcement or identification security. Example: "The ABC Company provides specialty papers for manufacturing titles and other secure information. Safety features include sequential numbering and background security designs. The security features of our product will reduce fraud.") This description will be used in the directory.

Please indicate the directory category you wish your organization to be listed under:

- |   |   |
|---|---|
| <input type="checkbox"/> Associations   | <input type="checkbox"/> Motor Carrier  |
| <input type="checkbox"/> Automated License Plate Readers                          | <input type="checkbox"/> Motor Carrier Technology/Indicia/Production                        |
| <input type="checkbox"/> Biometrics   | <input type="checkbox"/> Outsourcing  |
| <input type="checkbox"/> Consulting   | <input type="checkbox"/> Paper/Form Manufacturing   |
| <input type="checkbox"/> Customer Service Solutions Services/<br>Public Relations | <input type="checkbox"/> Queuing Solutions  |
| <input type="checkbox"/> Document Management                                      | <input type="checkbox"/> Security/Fraud Solutions   |
| <input type="checkbox"/> Driver Data  | <input type="checkbox"/> System Modernization   |
| <input type="checkbox"/> Driver Licensing Technology/Card<br>Personalization      | <input type="checkbox"/> Temporary Tags and Handicap Placards                               |
| <input type="checkbox"/> Driver Safety  | <input type="checkbox"/> Vehicle Data   |
| <input type="checkbox"/> Driver Testing   | <input type="checkbox"/> Vehicle Emissions  |
| <input type="checkbox"/> Electronic Tolling                                       | <input type="checkbox"/> Vehicle History  |
| <input type="checkbox"/> Government   | <input type="checkbox"/> Vehicle Renting And Leasing  |
| <input type="checkbox"/> Insurance  | <input type="checkbox"/> Vehicle Safety   |
| <input type="checkbox"/> Insurance Verification                                   | <input type="checkbox"/> Vehicle Titling and Registration—<br>Technology/Indicia/Production |
| <input type="checkbox"/> Ignition Interlock                                       | <input type="checkbox"/> Miscellaneous  |
| <input type="checkbox"/> Knowledge Testing  |   |
| <input type="checkbox"/> License Plate Production                                 |   |

### Section E

If your organization collects motor vehicle-related data, specify how the data is stored, how it is used and if it is made available to other persons or organizations.

AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM

**Section F**

List other motor vehicle and/or law enforcement agencies, associations or organizations with which your organization is affiliated.

**Section G**

Within the past (5) years, has any administrative or judicial body made a finding or issued an order concerning your organization or to your organization that pertains to conduct that has relevance to the ongoing activities or mission of AAMVA?

No  Yes

If "YES" please explain:

**Section H**

*Eligibility Certification (please check to the left of each statement)*

Our organization has read and is supportive of AAMVA's Mission and Vision.

When conducting business with AAMVA, its members and affiliates, representatives of our organization will abide by AAMVA's commitment to respectful conduct and an environment free from discrimination and harassment.

Our organization will not use its affiliation with AAMVA and its affiliates or any logo, symbol or other identifying characteristics of AAMVA in conjunction with any advertising or promotion for any product or service without the specific written approval of AAMVA.

Our organization is not prohibited and does not have employees prohibited from conducting business with the United States or Canadian federal governments or jurisdictions in either country.

I certify that our organization meets the eligibility certification requirements listed above:

Name:

Date:

**Section I**

*Membership Category*

**Category I:** Associations, not-for-profits, educational institutions, Indian Nations and governments or agencies other than United States, Canada and Mexico. (\$1,155)

**Category II:** All other business organizations. (\$2,640)

**Local Government:** Local governmental units of the United States, Canada and the Mexican Federal Governments. (\$788)

**Local Government Law Enforcement:** Local governmental law enforcement units of the United States, Canada and the Mexican Federal Governments. (\$788)

## AAMVA ASSOCIATE MEMBERSHIP APPLICATION FORM INSTRUCTIONS

Please complete all sections of the application form. AAMVA will accept applications for associate membership at any time during the year. Your application will not be processed until all information requested has been received.

Membership Dues	Category I	Category II	Local Government	Local Government Law Enforcement
	\$1,155	\$2,640	\$788	\$788

### Membership Categories

- **Category I:** Associations, not-for-profits, educational institutions, Indian Nations and governments other than United States, Canada and Mexico.
- **Category II:** All other business organizations.
- **Local Government:** Local governmental units of the United States, Canada and Mexico.
- **Local Government Law Enforcement:** Local governmental law enforcement units of the United States, Canada and the Mexican Federal Governments.

### Applications in a Pending Status

While your application is in a pending status, AAMVA will offer your organization member rates for registration, exhibit fees and advertising. No other AAMVA member benefits will be extended until the Board of Directors approves your application.

### Disapproved Applications

If an application is NOT approved, we will contact you by telephone or email with additional information.

### Completing the Application Form

Please complete all sections of the application form. Your application will not be processed until all information requested has been received, Once approved, we will contact you regarding the appropriate dues payment.

### Section A: Company and Contact Information

Please provide your formal company name and headquarters address including post office box number or suite number if applicable. Include your organization's Web site address. The primary contact should be the person AAMVA should send material to when one per organization is distributed (e.g., surveys). The dues contact person will receive AAMVA dues renewal notices.

### Section B: Fax Information

Check the box if you do NOT want AAMVA to fax business documents, meeting notices, dues notices and other material to your employees.

### Section C: Organization Mission

Describe your organization's mission or purpose.

### Section D: Organization Description

Provide a concise description of your organization's products and/or services and how they would benefit AAMVA members in regard to motor vehicle administration, law enforcement or identification security.

### Section E: Data Collection Information

If your organization collects motor vehicle-related data, indicate if the data is stored, how it is used and if it is made available to other persons or organizations.

### Section F: Organization Memberships

List all other motor vehicle and/or law enforcement agencies, associations or organizations with which your organization is affiliated.

### Section G: Organization Finding/Judgments

Circle YES or NO to indicate if any administrative or judicial action has been taken against your organization that would imperil your eligibility for membership. If YES write a brief explanation in the space provided.

### Section H: Eligibility Certification

Check the box of each statement to certify that you have read and understand each eligibility certification requirement. In addition, you must sign and date the application certifying that your organization meets the requirements.

### Application and Payment

Submit application via email to [associatemembership@aamva.org](mailto:associatemembership@aamva.org) or mail to the following address: American Association of Motor Vehicle Administrators, P.O. Box 38056 Baltimore, MD 21297-8056

### Please contact AAMVA at:

[associatemembership@aamva.org](mailto:associatemembership@aamva.org) or by telephone at 703-522-4200 should you have additional questions.

*Please complete all sections of the application form. Your application will not be processed until all information requested has been received. Once approved, please submit the appropriate dues payment.*