



## Contractor Membership Application

**Dues Year: 2018-2019**

Dear School Transportation Professional,

Thank you for choosing to join NSTA! In order to provide you with the best service possible, please complete this form and mail it to the NSTA Office, fax it to 703-684-3212, or email a scanned copy to [info@yellowbuses.org](mailto:info@yellowbuses.org). NSTA accepts payment in the form of check or credit card.

**Dues:**  
Please refer to the box below to determine your dues rate. Contractor membership dues are calculated based on your active fleet size. Active fleet size refers to your active route buses and does not include spares.

| <u>Fleet Size</u> | <u>Total Amount Due</u>                       |
|-------------------|---|
| 0-749             | \$150 (first bus) + (additional buses) x \$21 |
| 750-999           | \$15,000.00                                   |
| 1,000-1,499       | \$20,000.00                                   |
| 1,500-1,999       | \$25,000.00                                   |
| 2,000-2,499       | \$30,000.00                                   |
| 2,500-2,999       | \$35,000.00                                   |
| 3,000-3,999       | \$40,000.00                                   |
| 4,000-4,999       | \$45,000.00                                   |
| 5,000-9,999       | \$50,000.00                                   |

### Company Information:

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fleet size: \_\_\_\_\_

### Newsletter Sign-Up:

NSTA's monthly newsletter provides members with the latest safety, regulatory and industry news affecting contractors.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

### Payment Information:

Please make checks payable to **National School Transportation Association** and mail to:

**623 North Broad Street, Lansdale, PA 19446** along with this application.

To remit payment by credit card, please fill out the authorization form attached.

*By order of the Omnibus Reconciliation Act of 1993, 37.9% of your NSTA dues are considered a business expense and are therefore not tax deductible.*



# One Time Credit Card Payment Authorization Form

Please sign and complete this form to authorize the *National School Transportation Association* to make a one time debit to your credit card listed below.

By signing this form you give NSTA permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

**Please complete the information below:**

I \_\_\_\_\_ authorize NSTA to charge my credit card account indicated below for  
 (full name)

\_\_\_\_\_ on or after \_\_\_\_\_ with the understanding that it will be  
 (amount) (date)

processed within 7 days from receipt. This payment is for 2018-2019 Contractor Dues.  
 (description of goods/services)

Billing Address \_\_\_\_\_ Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email \_\_\_\_\_

Card Type:  Visa  MasterCard  AMEX  Discover

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) \_\_\_\_\_

I authorize the above named business to charge the credit card indicated on this authorization form according to the terms outline above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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