



Contractor Membership Application

Dues Year: 2019-2020

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. NSTA accepts payment in the form of check or credit card.

Dues:

Contractor membership dues are based on your active fleet size. Active fleet size refers to your active route buses and does not include spares. Membership costs just \$150 for your first bus and only \$21 for each additional bus. Contractors with 750 or more buses should call for large fleet pricing.

<u>Cost</u>	<u>Rate</u>	<u>Total</u>
\$150	First Bus	\$150.00
\$21	X _____ additional active buses	\$
	Total Cost >>	\$
	Fleets of 750 buses or more should call for large fleet pricing	

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, 38.7% 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
(amount) (date)

processed within 7 days from receipt. This payment is for be 2019-2020 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 _____

By order of the Omnibus Reconciliation Act of 1993, 38.7% of your NSTA dues are considered a business expense and are therefore not tax deductible.