



Supplier Membership Application

Please complete the fields below.

Contact Name:	Title:	
Company:		
Company Description:		
Address:		
City:	State:	Zip:
Phone:		
Fax:		
E-Mail:	Website Address:	

Benefits of Membership:

- Registration in PMAF's Supplier Member Directory for quick reference to movers in need of solutions.
- Running display ads in the Mover portion of the PMAF website to raise awareness of your company and products
- Direct access to a network of moving companies to market your current product and test new ones.
- Use of the PMAF mover mail and e-mail lists for ready access to market.
- Regular Updates on Issues that Affect Your Customers.
- Opportunity to offer PMAF-only discounts to make your company stand out.

Method of Payment: Check (\$495 payable to **PMAF**) Visa MasterCard

Card # _____ Security Code: _____ Expiration Date __/__/__

Name on Card _____ Signature _____

Please return completed application and payment to: PMAF, 1400 Village Square Blvd #3-175, Tallahassee, FL 32312.
Your membership dues are valid for 12 months from the date your application is processed.