



# TOWA

PO Box 885 - Bridge City TX 77611 - Phone 409 718-0645 Fax 409 735-6729

Please complete this membership application, return by mail along with your dues check or complete the credit card info and return by fax.

## MEMBERSHIP APPLICATION/RENEWAL FORM (2018)

All Individual Membership levels are listed by Name on TOWA website. Corporate Members are listed by Company Name on TOWA website and Name

**✓ Step 1 - Mark the correct TOWA Membership Category that best describes your company (mark only ONE category):**

- |                                     |   |   |                                       |
|-------------------------------------|---|---|---------------------------------------|
| <input type="checkbox"/> Engineer   | <input type="checkbox"/> Academic       | <input type="checkbox"/> Installer            | <input type="checkbox"/> Regulator    |
| <input type="checkbox"/> Designer   | <input type="checkbox"/> Soil Scientist | <input type="checkbox"/> Maintenance Provider | <input type="checkbox"/> Manufacturer |
| <input type="checkbox"/> Sanitarian | <input type="checkbox"/> Pumper         | <input type="checkbox"/> Supplier/Wholesaler  |                                       |

**✓ Step 2 - Mark the TOWA Local Chapter you would like to join (OPTIONAL):**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Alamo (San Antonio)   | <input type="checkbox"/> East Texas (Tyler \$25)    | <input type="checkbox"/> North Central (Waxahachie) |
| <input type="checkbox"/> Brazos Valley (Bryan) | <input type="checkbox"/> Heart of Texas (Waco \$20) | <input type="checkbox"/> Three Rivers (Conroe \$30) |

**✓ Step 3 - Mark the appropriate Membership Level that best suits your needs (mark only ONE level):**

- Corporate Membership Dues** (please complete pages 2 & 3 as needed) = **\$125.00**
- Standard Membership Dues** (Voting Member) = **\$ 95.00**
- Associate Membership Dues** (Non-voting Member) = **\$ 95.00**

All Dues received during December will be credited to next year

Associate membership is for non industry related individuals who wish to support our organization and corporate membership employees.

**✓ Step 4 - Complete the following membership information** (Company information section\* is for Corporate Membership ONLY):

\*Company: \_\_\_\_\_ Website: \_\_\_\_\_

Name: \_\_\_\_\_ (credit card users: name on card & billing address)  
Last First MI.

Address: \_\_\_\_\_  
Street / P.O. Box Apt. / Suite

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ @

OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: \_\_\_\_\_  
Complete Number with OS or MP designation if applicable

**✓ Step 5 - Complete the following information If using Credit/Debit Card:**

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ (MM/YY)

CID #: \_\_\_\_\_ The CID (card identification) number is the (3) digit number printed at the end of the signature panel on the back of VISA and MasterCard, Discover Card is immediately following the credit card number. American Express Card is the (4) digit number printed on the front following the credit card number.

**✓ Step 6 - Total Membership Dues, Chapter dues, Sponsor level from this page or all (3) pages (check the appropriate boxes)**

Please include your check or Money Order Payable to TOWA and mail to the address above. **TOTAL \$** \_\_\_\_\_

For more information email: [randy@txowa.org](mailto:randy@txowa.org) or call 409 718-0645

Check the box for your preferred method of receiving Ballots and Voting Reminders:  Email  Fax  Mail

# MEMBERSHIP APPLICATION/RENEWAL FORM (2018)

**✓ Step 7 - Complete the following EMPLOYEE information:** (If necessary use multiple pages)

Associate Member # 1	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>
Associate Member # 2	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>
Associate Member # 3	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>
Associate Member # 4	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>
Associate Member # 5	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>
Associate Member # 6	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>MI.</span> </div> Cell: (    ) _____ Email: _____ @ _____ OSSF (OS,MP,SI,DR or MT), Sanitarian or P.E. Number for CEU documentation: _____ <div style="text-align: right; font-size: x-small;">Complete Number with OS or MP designation if applicable</div>

**✓ Step 8 - Total Associate Membership:**

Please include the totals from this page with the totals on page 1.  
 For more information email: [randy@txowa.org](mailto:randy@txowa.org) or call 409 718-0645

**THIS PAGE SUBTOTAL \$** \_\_\_\_\_

Corporate /Associate Membership Dues	Amount	Details
Corporate Membership	\$125.00	Includes Company and one Voting Membership (check box on pg. 1)
Associate Member # 1	\$50.00	Includes one Non-voting Membership & mailers only
Each Additional Associate Member	\$50.00	Includes one Non-voting Membership & mailers only

## CORPORATE MEMBERSHIP LEVEL

Corporate Membership of TOWA is crucial to ensure that our voice of reason is heard before those who regulate our trade, profession and business. Please consider supporting our efforts in 2018 at a level that's appropriate for your organization.

Each level includes:

<b>\$500.00</b>	<b>Bronze</b>	<b>Listing on the Web Site</b> , mention in newsletter and recognition at the annual meeting.
<b>\$750.00</b>	<b>Silver</b>	BUSINESS CARD ad for 1 year in the <i>Insider</i> , mention in <i>Insider</i> , signage at TOWA meetings, listing on web page, and certificate awarded at the Annual meeting.
<b>\$1000.00</b>	<b>Gold</b>	QUARTER page ad for 1 year in the <i>Insider</i> , additional mention in Insider of level of membership for 1 year, 1 <sup>st</sup> . choice of booth selection at the 2017 Annual Conference, listing in Membership Directory, signage at TOWA meetings, listing and pop up ads on the home page of TOWA's web site and certificate to be awarded at annual meeting. <b>1 VOTING MEMBERSHIP INCLUDED.</b>
<b>\$1500.00</b>	<b>Platinum</b>	HALF page ad 1 year in the <i>Insider</i> , 1 <sup>st</sup> . choice of booth selection at the 2017 Annual Conference, additional mention in Insider of level of membership for 1 year, listing in Membership Directory, signage at TOWA meetings, listing and pop up ads on the home page of TOWA's web site and plaque to be awarded at annual meeting. <b>(1) VOTING MEMBERSHIP &amp; (1) NON-VOTING ASSOCIATE INCLUDED</b> , additional associate (non-voting) employee memberships discount of \$50 each.
<b>\$2,000.00</b>	<b>Diamond</b>	FULL page ad 1 year in the <i>Insider</i> , 1 <sup>st</sup> . choice of booth selection at the 2017 Annual Conference, additional mention in Insider of level of membership for 1 year, listing in Membership Directory, signage at TOWA meetings, listing and link on web page and pop up ads on the home page of TOWA's web site and plaque to be awarded at annual meeting. <b>(2) VOTING MEMBERSHIPS INCLUDED</b> , additional associate (non-voting) employee memberships discount of \$50 each.

Bronze and Silver level please add \$500.00 or \$750.00 to your Corporate Membership Dues of \$125.00

Gold\*, Platinum\* and Diamond\* levels the "Corporate Membership Dues of \$125.00" are included.

Please mark one box below to support your organization at the corporate membership level of your choice:

- Bronze = \$625.00                       Silver = \$875.00  
 Gold\* = \$1,000.00                       Platinum\* = \$1,500.00                       TOWA Diamond\* = \$2,000.00

Name of Corporation: \_\_\_\_\_

Name of (1st) Voting Member: \_\_\_\_\_

Name of (2nd) Voting Member (Diamond Level Only): \_\_\_\_\_

Please add Associate Member information to Page (2)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail: \_\_\_\_\_@\_\_\_\_\_ Website: \_\_\_\_\_

Name as you want it to appear in the *Insider Newsletter*: \_\_\_\_\_

Name as you want it to appear on the certificate: \_\_\_\_\_