



## APPLICATION FOR MEMBERSHIP

Applying for Active Membership (Job Shop)

Applying for Associate Membership (Captive Shop)  
 Has a finishing operation, finishes own products, less than 50% job shop work is taken in.

NAME OF COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE (\_\_\_\_) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

YEAR ESTABLISHED \_\_\_\_\_ NUMBER OF EMPLOYEES \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

CORPORATION  PARTNERSHIP  INDIVIDUAL  PLANT AREA \_\_\_\_\_ SQ. FT.

**PRINCIPAL OFFICERS**

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

MANAGEMENT PERSONNEL WHO WILL REPRESENT COMPANY IN EXERCISING THE PRIVILEGES OF MEMBERSHIP IN MFASC AND RECEIVE ASSOCIATION MAIL.

\_\_\_\_\_  
OFFICIAL REPRESENTATIVE

\_\_\_\_\_  
ALTERNATIVE REPRESENTATIVE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
TITLE

IN MAKING APPLICATION FOR MEMBERSHIP IN THE MFASC AND NASF, WE AGREE TO ABIDE BY THE ASSOCIATIONS' BY-LAWS, AND TO PAY DUES AS REQUIRED (DUES ARE PAYABLE IN ADVANCE). A CHECK FOR OUR FIRST QUARTER'S DUES IS ENCLOSED.

WE HAVE BEEN ADVISED OF THE PRIVILEGES AND RESPONSIBILITIES OF MEMBERSHIP.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

SPONSORED BY: \_\_\_\_\_

COMPANY: \_\_\_\_\_

Application approved by MFASC Board of Directors Date: _____  _____  _____  _____
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<b>QUARTERLY DUES</b>	
<b>ACTIVE MEMBER</b>	<b>(JOB SHOP)</b>
1-10 EMPLOYEES.....	\$650.00
11-20 EMPLOYEES.....	\$820.00
21-50 EMPLOYEES.....	\$1,040.00
51 OR MORE EMPLOYEES.....	\$1,200.00
<b>ASSOCIATE MEMBER</b>	<b>(CAPTIVE SHOP)</b>
	\$1,200.00

# INFORMATION REQUIRED FOR PROCESSING APPLICATION

PROCESSES PERFORMED IN PLANT (NOT SUBCONTRACTED)

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COMPANY OPERATES \_\_\_\_\_ SHIFTS:                      UNION SHOP \_\_\_\_\_                      NON-UNION SHOP \_\_\_\_\_

PRIMARY FIELD OF ACTIVITY: \_\_\_\_\_

DEFENSE \_\_\_\_\_% COMMERCIAL \_\_\_\_\_%

PLEASE GIVE A BRIEF DESCRIPTION OF YOUR COMPANY AND MAJOR SPECIALIZATION: \_\_\_\_\_

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WHAT IS YOUR PRIMARY PURPOSE IN WANTING TO JOIN THE MFASC? \_\_\_\_\_

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AS A MEMBER, WHAT OBJECTIVES WOULD YOU LIKE TO SEE THE MFASC PURSUE? \_\_\_\_\_

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WHAT ASSOCIATION ACTIVITIES DO YOU BELIEVE YOU COULD BE HELPFUL IN:

\_\_\_\_ PROGRAMS      \_\_\_\_ MEMBERSHIP      \_\_\_\_ MILSPECS      \_\_\_\_ ENVIRONMENTAL POLLUTION  
\_\_\_\_ INSURANCE      \_\_\_\_ SPECIAL EVENTS      \_\_\_\_ EDUCATION      \_\_\_\_ SAFETY  
\_\_\_\_ OTHER (Please specify)

## ***VOLUNTEERS RECEIVE MUCH MORE THAN THEY GIVE***

*FOR FURTHER INFORMATION, CALL WRITE, or E-MAIL:*

**MFASC HEADQUARTERS**

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