



MICHIGAN TOWING ASSOCIATION

Providing Advocacy for Towing Since 1941

APPLICATION FOR MEMBERSHIP

Please check one: Regular Member Class II Member (Non-Tower)
Membership Dues \$350/year

Company Name _____

Company Address _____

City _____ State _____ Zip Code _____

Work Phone _____ Fax _____

Name of Owner _____

Owner Cell _____ Email _____

Years in Business _____ # of Employees _____ # of Wreckers _____

Website _____

Other associations your company belongs to _____

CVED # _____ DOT # _____

The undersigned is requesting acceptance into the membership of the Michigan Towing Association and promises to abide by the By-Laws of the Association. Unless otherwise noted the member's information will be listed on the MTA website and in the membership directory. The following signature also gives the MTA permission to charge your credit card for dues.

Signature _____ Title _____ Date _____

Office Use Only

Date of Membership Approval _____ Signature of Approval _____

Amount Paid _____ Check # _____

Credit Card # _____ Exp Date _____ Security Code _____ Type of card _____

**Return Applications to
Michigan Towing Association
120 N. Washington Sq, Suite 110A, Lansing, MI 48933**

Please call the MTA office at 517.371.2223 with any questions