

# MICHIGAN INDEPENDENT AUTOMOBILE DEALERS ASSOCIATION

Serving the Industry Since 1981

55 E. Long Lake Rd. PMB 233  
Troy, Michigan 48085  
(248) 828-7010 Fax: (248) 828-7012 Email: nchapman@miada.org  
Visit Our Website at www.miada.org

## *An Association of and for the Michigan Used Car Dealer!*

This is our personal invitation to join the Michigan and National Independent Automobile Dealers Professional Association

**YES**, it is important to me to be recognized as a professional! Enclosed are my annual dues of \$250 to make sure that my business has all the advantages MIADA/NIADA provides to me to put me at the forefront of my profession. By completing this form, I am consenting to and giving NIADA/MIADA/AEC, Inc., its affiliates and subsidiaries, my permission to (until I give written notice to discontinue) contact me and provide information to me at the mailing and email addresses, telephone and fax number(s) I have provided. I certify that (I am or we are) eligible for membership in MIADA. I agree upon the signing of this application and if accepted as a member, to uphold the Bylaws and the Constitution of the Association, its Code of Ethics, and all Local, State, and Federal Laws pertaining to the Automobile Business.

<b>TYPE OF MEMBERSHIP YOU ARE APPLYING FOR (CHOOSE ONE):</b>		<input type="checkbox"/> Regular	<input type="checkbox"/> Associate*
Firm Name _____	Telephone ( _____ ) _____		
Street Address _____	Cell/Pager ( _____ ) _____		
City _____	Fax ( _____ ) _____		
State _____ Zip _____ - _____	E-Mail Address _____		
County _____	Owner's Name(s) _____		
Dealer in: <input type="checkbox"/> Used <input type="checkbox"/> Others <input type="checkbox"/> New <input type="checkbox"/> Describe _____	License # _____		
Sponsor _____			
Applicant's Signature(s) <b>X</b> _____			
Date _____			

\*Associate membership may be held by a person, firm, or corporation engaged in a business allied with or deriving benefit from the automotive industry.

### ANNUAL DUES ARE \$250.00 (INCLUDES DUES IN NIADA)

**Please Check One Payment Option.**

**\$250 Paid in Full by Check, Money Order, or Credit Card**

Discover  Visa  MasterCard  Amex  Check

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Customer Security Code (CSC) \_\_\_\_\_ Amount \$ \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

**Two (2) Installments of \$130.00\*\***, (available only for Credit Card Payments)

Discover  Visa  MasterCard  Amex

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Customer Security Code (CSC) \_\_\_\_\_ Amount \$ \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

\*\* Credit Card will be charged upon receipt, then again 30 days later. By choosing the installment option you authorize MIADA's Management Company, AEC, Inc., to debit your credit card for both installments. A \$5 administration fee for installment is included.

**Mail or Fax to: MIADA, 55 E. Long Lake Rd., #233, Troy, MI 48085 Fax: (248) 828-7012**