Membership Category Requirements

Regular
Regular Members shall consist of any company whose principal business is the marketing of automotive parts. Regular Members must:

- Engage primarily in selling automotive aftermarket products and supplies;
- Transact business in a sufficient volume to handle automotive aftermarket products and supplies in wholesale quantities; and
- Carry at all times at its principle place of business a representative stock of automotive aftermarket products and supplies it sells and from which it can fill the orders of its customers.

Affiliate
Affiliate Members shall consist of business firms and/or individuals whose principal business is the selling to or servicing of Regular Members. Customers of Regular Members, provided their activities do not conflict with any section of the Association’s Articles of Incorporation, Bylaws, or otherwise are prohibited by law from being a member of the Association. They may participate in the Association’s programs subject to the terms and conditions of the various programs as may be required by the Association’s Board of Directors or by any law applicable to such program. Affiliate Members shall not be entitled to vote, hold office, or participate in any way in the management of the Association’s affairs. At no time shall the total number of Affiliate Members exceed the total number of Regular Members.

Membership Benefits

- Educational/Motivational Materials
- Legislative Representation
- Political Action Committees (PAC)
- Annual Conference & Trade Show
- Industry Promotion
- Scholarship Program For Universities/Tech Schools
- Group Health Insurance Programs
- Group Dental Insurance Programs
- Group Life Insurance Program
- Group Vision Program
- Group Workers’ Compensation
- Human Resources Information
- Legal Updates
- OSHA Compliance Information
- Business Forms & Supplies

Partner Programs …

- Credit Card Processing
- Employee Background Check
- Payroll Processing Program
- Property & Casualty Insurance
- Safety Programs

“A Trade Association Serving the Automotive Parts Manufacture, Distribution, Service & Repair Industry”
Company Name (DBA) ___________________________________________  
Legal Name (on tax records) ______________________________________  
Contact ________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Physical Address ____________________________________________  
Physical City/State/Zip __________________________________________  
Mailing Address ____________________________________________  
Mailing City/State/Zip __________________________________________  
Principal Business Activity ________________________________________

Additional Locations

Physical Address ____________________________________________  
Physical City/State/Zip __________________________________________  
Personnel Count _________  
EIN ____________________________  
Phone ( ) ____________________________  
Fax ( ) ____________________________  
Mailing City/State/Zip __________________________________________  
Mailing Address ____________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Contact ____________________________________________  
Personnel Count _________  
EIN ____________________________  
Phone ( ) ____________________________  
Fax ( ) ____________________________  
Physical Address ____________________________________________  
Physical City/State/Zip __________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________  
Owner (s) ____________________________________________  
First Middle Last, Suffix (Name Preferred) ____________________________  
Email __________________________________________

Dues Schedule

AAAS dues are based on personnel count at ALL locations (including owners). A 5% discount is offered on annual dues payments if payment is received within 30 days.

<table>
<thead>
<tr>
<th>PERSONNEL COUNT RANGE</th>
<th>ANNUAL DUES</th>
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<tbody>
<tr>
<td>150 +</td>
<td>$ 3,995</td>
</tr>
<tr>
<td>101 - 149</td>
<td>2,995</td>
</tr>
<tr>
<td>51 - 100</td>
<td>1,995</td>
</tr>
<tr>
<td>26 - 50</td>
<td>1,195</td>
</tr>
<tr>
<td>16 - 25</td>
<td>995</td>
</tr>
<tr>
<td>6 - 15</td>
<td>695</td>
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<tr>
<td>1 - 5</td>
<td>295</td>
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</tbody>
</table>

PAYMENT OPTIONS

AAAS Fiscal Year: October - September

Quarterly ☐  
Annually ☐

Signature ____________________________  
Date ____________________________

We submit the above information to become a member of Automotive Aftermarket Association Southeast, Inc.  
We realize that our company’s acceptance is subject to the AAAS constitution and bylaws which obligates us to at least 12 months of membership.