



OHIO
AUTOMATIC
MERCHANDISING
ASSOCIATION

Membership Application

Please enroll me as a MEMBER of the Ohio Automatic Merchandising Association. I understand this will provide me with all the membership rights and privileges as outlined in the By-Laws of the organization.

Dues are payable annually based upon the dues schedule below.

Please make a copy of the form below, fill it out, and mail with your check to:

Shaan Carlson Woo, Executive Director
OHIO AUTOMATIC MERCHANDISING ASSOCIATION
50 WEST BROAD ST., SUITE 1111
COLUMBUS, OH 43215-5912

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Owner or Manager Name: _____

Business Phone: _____ Fax: _____

E-mail Address: _____

Yes, my signed check is attached _____

Dues Schedule

Employees: 76 and over	\$400
Employees: 51 to 75	\$300
Employees: 21 to 50	\$250
Employees: 11 to 20	\$200
Employees: 1 to 10	\$150