



Corporate Membership Application

I submit this application for membership and promise to abide by the Society's Bylaws and code of Ethics. I understand that (1) this application is subject to acceptance by the SCRS Membership Committee (2) this membership is not transferable (3) I may use the Society's logos to my business only during the time I am a member in good standing.

Return this application, along with the corporate membership fee of \$5,000 made payable to:

**Society of Collision Repair Specialists
P.O. Box 909
Prosser, WA 99350**

Company Name: _____

Contact Name & Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Fax: () _____

Corporate Members Benefits

The Corporate name will be:

- Listed on SCRS letterhead
- Listed on the SCRS website (www.scrs.com)
- Listed on the SCRS Fact & General Information brochures
- Included in SCRS printed materials mailed to members