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NLBMDA MANUFACTURERS AND SERVICES COUNCIL (MSC) MEMBERSHIP APPLICATION

HELP SUPPORT OUR INDUSTRY BY JOINING TODAY!

Company Name: _____ Telephone: _____
 Mailing Address: _____ Fax: _____
 City: _____ State: _____ Zip: _____ Country: _____
 Name of primary contact: _____ Title: _____
 E-mail Address of primary contact: _____

- ◆ What is the total number of employees at your company? _____
- ◆ Company Web Address _____
- ◆ Company E-mail _____
- ◆ List all officers of the company, title, and email address of each

| | | |
|------|-------|--------|
| Name | Title | E-mail |
| Name | Title | E-mail |
| Name | Title | E-mail |
| Name | Title | E-mail |
| Name | Title | E-mail |
| Name | Title | E-mail |

- ◆ What are the products and services supplied to the industry?
- ◆ _____
- ◆ _____
- ◆ _____
- ◆ _____

Submitted by _____ Title _____ Date _____

Signature _____



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E: membersupport@dealer.org

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Send to:

NLBMDA – Jonathan M. Paine
President & CEO
2025 M Street, NW, Suite 800
Washington DC 20036-3309
Phone: (202) 367-2496
E: jonathan@dealer.org
W: www.dealer.org

NLBMDA Use only

Application received _____

Approved _____

Signature _____

Payment Information:

Amount Due: _____

Please make checks payable to NLBMDA and remit to:

NLBMDA
8625 SOLUTION CENTER
Chicago, IL 60677-8006