



APPLICATION FOR MEMBERSHIP

for the Florida RV Trade Association

Please check one box which indicates the type of membership you are applying for:

- | | | | | | |
|--|-----------|------------------------------------|-----------|--|-----------|
| <input type="checkbox"/> RV MANUFACTURER | \$325.00* | <input type="checkbox"/> FINANCE | \$275.00* | <input type="checkbox"/> SERVICE | \$225.00* |
| <input type="checkbox"/> CAMPGROUND | \$225.00* | <input type="checkbox"/> INSURANCE | \$275.00* | <input type="checkbox"/> RV REPAIR/SERVICE | \$225.00* |
| <input type="checkbox"/> RV DEALER | \$225.00* | <input type="checkbox"/> SUPPLIER | \$225.00* | | |

*Note: Membership dues include an optional \$75.00 donation to the Florida RV Political Committee (FRVPC).

DEALER LICENSE # _____ NEW ___ USED ___ RENTALS _____ SERVICE CENTER _____ MOBILE SERVICE _____
 LP Gas License # _____ (copy of License required)

Make check payable to FRVTA. To pay by credit card use the Credit Card Transaction Form or call State Office.

ANNUAL MEMBERSHIP PERIOD: OCTOBER 1 – SEPTEMBER 30

Information provided below will be utilized as current membership listing.

Please print or type:

Company Name: _____

Business/Product Description: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

Physical Address (if different): _____

Note: CHECK HERE IF YOU DO NOT WANT YOUR PHYSICAL ADDRESS LISTED ON OUR WEBSITE OR PLACED IN RV GUIDE.

Phone: _____ Toll Free: _____ Fax: _____

Website: _____ Business E-mail: _____

Designated Rep: _____ Title: _____

Rep Direct Phone or Cell: _____ Rep E-mail: _____

Business Owner/Corporate Officer (if different than Rep): _____

I hereby submit my application for membership to the Florida RV Trade Association. If approved, I agree to abide by all Bylaws of the Association, rules and regulations so set by the Board of Directors and as stated in the Member Pledge. I understand that by providing the information above, I consent to receive any and all communications sent by or on behalf of the Florida RV Trade Association solely via mail, e-mail, telephone or fax.

Signature: _____ **Date:** _____

Designated Representative/Liaison to FRVTA

Notification Required by Federal Law – DUES PAID TO THE FLORIDA RV TRADE ASSOCIATION, INC., ARE NOT TAX DEDUCTIBLE. Dues, contributions, payments for product or services, sponsorship or registration fees paid to the Florida RV Trade Association, Inc., are not deductible as charitable contributions for Federal Income Tax purposes.

FOR FRVTA USE ONLY

_____	_____	_____	_____
Membership Type / Region	Date Received	Amount Received	Check # or Approval Code
Executive Director Approval: _____		Date: _____	



Florida RV Trade Association

10510 Gibsonton Drive • Riverview, Florida 33578
(813) 741-0488 • Toll Free 1-800-330-7882 • FAX (813) 741-0688
www.frvta.org • info@frvta.org

To Prospective Member:

The FRVTA Board of Directors' voted to re-establish "***The Florida RV Trade Association Member Pledge***" as a condition of membership. This Pledge is recognized as a sign of good and fair business practices by all members of the Association. What that means is that in order to remain or become a member of FRVTA you must have a signed Member Pledge on file at the State Office.

The Member Pledge must accompany a new Membership Application. We are including a "Designated Signer" form that will allow an authorized person to sign on behalf of the Owner.

Please sign and return the Member Pledge to the State Office via fax, email (sharlenen@frvta.org) or by mail and retain a copy for your records. Feel free to contact me with any questions at 1-800-330-7882.

Thank you for your support.

Dave Kelly

Dave Kelly
Executive Director



Florida RV Trade Association Member Pledge

As a member of the Florida RV Trade Association we pledge that we will strive to manage our business with the following in mind:

Act in accordance with all state and federal regulations.

Advertise in an ethical and professional manner.

Promote, develop and operate according to the highest standards of ethical and moral conduct in our business and by our personnel.

Promote and further the interests of all phases of the RV Industry, in the state of Florida and throughout the U.S.

Operate our business in accordance with the FRVTA Antitrust Statement.

State the truth in all warranties of goods and services and will conscientiously fulfill them.

Avoid engaging in activities that reflect negatively on the Recreational Vehicle Industry.

Not knowingly represent any merchandise to be something it is not or engage in misleading advertising, sales promotion or other unethical business practices.

Deal fairly with all customers, prospective customers, suppliers, employees and all others upon whom we depend for success and survival.

Brian Copley

FRVTA President

Signature of Business Owner

Company: _____

Name: (Print) _____

Date: _____



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FRVTA Designated Signer Authorization Form

Note: This form is not required if the Designated Representative is the Business Owner/ Corporate Officer.

I authorize _____ to sign the Membership Application and Pledge to represent our company as the authorized representative/liaison to FRVTA.

Name of Company/Membership: _____

Name (Print): _____

I am: (circle one) a) Owner b) Dealer/Principal c) Corporate Officer

Signature: _____ Date: _____

Please return this form along with your Membership Application and Member Pledge.

Note: This form ONLY applies for the purpose of FRVTA Membership.