



MEMBERSHIP FORM

Application is hereby made by the undersigned for membership for the year _____ in Railway Systems Suppliers, Inc.

We are engaged in the following areas of activity covered by your association:

- 1) _____
- 2) _____

Firm Name: _____

Address: _____

City: _____ State/Province: _____

Country: _____ Zip/Postal Code: _____ Phone Number: _____

By: _____ Title: _____

Email: _____

INITIATION FEE: \$500.00

MEMBERSHIP DUES: \$450.00

CHECK ONE:

Active (Exhibiting) Member

Associate (Non-Exhibiting) Member

TOTAL AMOUNT ENCLOSED: \$950.00

Please make checks payable to:

RAILWAY SYSTEMS SUPPLIERS, INC.

13133 Professional Drive, Suite 100
Jacksonville, FL 32225

Bill My Credit Card:

I understand that a **3% processing fee** will be charged for this service

VISA MasterCard AMEX 3 or 4 digit security code _____

Card#: _____ Exp Date: _____ Zip: _____

Name on Card: _____ Phone #: _____

Signature: _____

For ACH/wire payments, please email theresa@rssi.org for remittance instructions