



# Rhode Island Trucking Association (RITA)

## MEMBERSHIP APPLICATION

The undersigned hereby makes application for membership in the Rhode Island Trucking Association, Inc. and encloses herewith the amount of \$\_\_\_\_\_ in payment of one years membership dues as per the condition of membership stipulated in the Constitution and By-Laws.

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Membership Levels

#### Carriers

- CARRIER MINIMUM - \$350.00
- MID LEVEL I CARRIER - \$450.00
- MID LEVEL II CARRIER - \$675.00
- MAX LEVEL CARRIER - \$1,450.00

#### Associates

- ASSOCIATE MINIMUM - \$350.00
- MID LEVEL ASSOCIATE - \$450.00
- MAX LEVEL ASSOCIATE - \$575.00

Application with check can be mailed or brought to the address below.

Application via CC can be e-mailed to: [chris@ritrucking.org](mailto:chris@ritrucking.org)

CREDIT CARD #: \_\_\_\_\_

EXPIRATION: \_\_\_\_\_ SEC. CODE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Rhode Island Trucking Association      401-729-6600  
831 Bald Hill Road      Warwick, RI 02886