



1269 BASSETT ROAD
WESTLAKE, OH 44145
PHONE: (440) 899-5009
EMAIL: INFO@LEMTA.COM
WEBSITE: LEMTA.COM



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MEMBERSHIP APPLICATION

MEMBER BENEFITS - WHY JOIN LEMTA?

- A voice In Washington DC & Columbus - LEMTA provides members with legislative advocacy on issues critical to the marine industry in Ohio
- Qualified Buyers - LEMTA markets boating throughout the region, building a database of people with interest in boating
- Boat Show Savings - Secure floor space at LEMTA produced boat shows at the best price

BASIC REQUIREMENTS FOR MEMBERSHIP

- Must be a business directly related to the recreational boating industry
- Must have been established for a minimum of one year
- Membership is open to businesses located in the state of Ohio
- Must have fully completed this application

APPLICATION PROCESSING

- Mail completed application to LEMTA, Attn: Membership, 1269 Bassett Rd, Westlake OH 44145
- Applications are reviewed by membership committee and submitted to Board of Trustees for approval.
- Application review may include an inspection and interview at the applicant's site of business, which would be conducted by members of the LEMTA membership committee
- A \$100 initiation fee must be included with application



MEMBERSHIP APPLICATION

Business name: _____
 Representative's name: _____ Title: _____
 Alternate representative: _____ Title: _____
 Address: _____ City: _____
 State: _____ Zip: _____ Phone: (____) _____ Fax: (____) _____
 Email: _____ Web Site: _____
 Type of business: _____ Date established: _____

Business is a: _____ Corporation _____ Partnership _____ Proprietorship
 Do you participate in business other than the marine operation? _____ Yes _____ No
 If "yes", please describe: _____

If "yes" to above question, what percentage of total business is attributable to marine? _____%

COMPANY PROFILE DATA:

(The following information about sales, payroll, and employment is gathered for compilation into total association figures only. Service and product information is gathered here for inclusion in LEMTA's statistical summary only. It is not used to determine merits for association membership.)

Circle company's annual sales	\$0000 - \$100,000	\$101,000 - \$250,000	\$251,000 - \$500,000
<i>(marine operations only):</i>	\$501,000 - \$1,000,000	\$1,000,000 - \$2,000,000	Over \$2,000,000

Number of employees: _____ Full time _____ Part time
 Approximate annual marine payroll (include benefits) \$ _____

GENERAL INFORMATION:

Principal product lines for which you are a franchised dealer, distributor or manufacturer:

Services offered *(circle applicable services)*

Boat Sales	Motor Sales	Trailer Sales	Accessory Dept.	Inflatable Sales	Ice
Service Dept.	Parts Dept.	Canvas/Ship/Service	Fuel Dock	Outdoor Storage	Restaurant
Indoor Storage	Launching Ramps	Travelift	Dockage Facilities	Transient Facilities	Dockside Elec/Water

Other services *(list)* _____

Trade references: *(Please list three marine suppliers to your firm)*

_____	_____
Name	Location
_____	_____
Name	Location
_____	_____
Name	Location



MEMBERSHIP APPLICATION

Do you intend to exhibit in any of the shows in the future?

If "yes", which shows?:

- Year(s) _____ Catawba Island Boat Show (April/May) Yes No
- Year(s) _____ Chicagoland In-Water Boat Show (August) Yes No
- Year(s) _____ Cedar Point North American Demo Boat Show (August) Yes No
- Year(s) _____ Mid-America Boat Show (January) Yes No

***Membership is not a requirement to exhibit at any LEMTA-produced show.**

Why do you desire membership in this association? _____

Are you willing to serve on a LEMTA committee if so appointed by the president? _____ Yes _____ No

(Your application for membership must be sponsored by two active LEMTA retail dealer members. See enclosed roster for listing.)

Member dealer name Date

Sponsor signature Phone Number

Member dealer name Date

Sponsor signature Phone Number

I have read the association's bylaws, particularly information pertaining to membership in Article V, which accompanied this application and I understand that if my application is approved by the LEMTA board of trustees I will be invoiced for the current dues. Further, I authorize LEMTA to obtain applicable reference and credit information as part of the normal application process and affirm the information provided by me herein is true and factual to the best of my knowledge.

Applicant's signature Date

Applicant's title



MEMBERSHIP APPLICATION

N.M.M.A.

**NATIONAL MARINE MANUFACTURERS
ASSOCIATION**

M.R.A.A.

**MARINE RETAILERS ASSOCIATION
OF AMERICA**

I.A.E.M.

**INTERNATIONAL ASSOCIATION OF
EXPOSITION MANAGERS**

N.A.C.S.

**NATIONAL ASSOCIATION OF
CONSUMER SHOWS**

B.O.F.

BOAT OHIO FOUNDATION

N.M.T.C.

NATIONAL MARINE TRADES COUNCIL

M.O.A.A.

**MARINA OPERATORS ASSOCIATION
OF AMERICA**

FOR LEMTA OFFICE USE ONLY

___/___/___ Date Received

_____ Check Enclosed

\$ _____ Amount

___/___/___ To Committee

___/___/___ To Board

Action Taken: _____