



**INTELLIGENT TRANSPORTATION
SOCIETY
OF NEW MEXICO**

**ORGANIZATIONAL
MEMBERSHIP APPLICATION
2012**

This application is for:

_____ Organization Membership \$ 200.00

Includes:

- 5 voting members
- ITSnewmexico.com Membership Page presence
 - Logo/hyperlink, and
 - Contact Information.

Primary Contact: _____ Title: _____

Company/Agency: _____ Dept _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

E-Mail: _____

Organization Type

Public Sector Private Sector University Association Nonprofit Other

Is your Agency a Member of ITS America? Yes No

Authorized Signature: _____ Date: ____/____/____

Official Use		
<input type="checkbox"/> Paid: _____	<input type="checkbox"/> Date: _____	<input type="checkbox"/> Donation: _____
<input type="checkbox"/> Cash	<input type="checkbox"/> Check No. _____	<input type="checkbox"/> Received: _____
<input type="checkbox"/> To Be Invoiced	<input type="checkbox"/> Invoiced	

(continued)

Organization Member #2

Mailing Address is the same for all members

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

E-Mail: _____

Organization Member #3

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

E-Mail: _____

Organization Member #4

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

E-Mail: _____

Organization Member #5

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

E-Mail: _____

Please forward the completed application and annual dues to:

ITS New Mexico
809 Copper Ave NW
Albuquerque, NM 87102

Make checks payable to: ITS New Mexico