

Membership Application & Dues Invoice for 2024

Name			
Company			
Street Address			
City, State, Zip Code			
TelephoneFax	Email		
OPERATOR MEMBER DUES			
Up to 2 employees		\$	200.00
Additional full-time employees*	X \$5 ^{.00} /each	\$	
Additional part-time employees*	X \$2 ^{.00} /each	\$	
*Include <u>ALL</u> employees except full-time	e cafeteria or commissa	ary pe	rsonnel.
ASSOCIATE MEMBER DUES***		\$ <u></u>	500.00
***Associate members include manufacturers, distributors,	brokers, and product suppliers.		
ADDITIONAL CONTRIBUTION TO TAN	Л А	\$	
TOTAL Amount Paid		\$	
Please return this statement with check	made payable to: ГАМА		
	ndy Conklin		
	rlington Lane nch, MS 38654		

"By signing this application, I give my express permission to fax, telephone or email me such notices and allow me (and my business or company) to receive notices, advertisements, announcements, brochures and other information from the National Automatic Merchandising Association (NAMA), its foundation and state council vie facsimile, telephone or email with no date of expiration. I agree to abide by the TAMA bylaws and to operate my business in a professional and ethical manner and comply with government regulations relevant to the food and beverage vending industry." Membership Dues are not deductible as charitable contributions for federal tax purposes but may be deductible as a business expense. As required by the Internal Revenue Code, TAMA estimates that the nondeductible portion of TAMA dues - the portion that is allocated to lobbying – is100%. Therefore 0% of your TAMA dues may be deductible for tax purposes.

Signature	Date