



Heartland Carwash Association

OUR MISSION:

Strengthen the professionalism of the carwash industry in our eight state region; Illinois, Iowa, Kansas, Minnesota, Missouri, Nebraska, South Dakota and Wisconsin through the dissemination of information, opportunities for idea exchanges, networking, lobbying efforts, and access to the latest in equipment and supplies.

HCA MEMBERSHIP APPLICATION

COMPANY INFORMATION Member communications including HCA Splash Newsletter go to primary contact at BUSINESS MAILING ADDRESS. (Please do not list a location with no US Mail receptacle.)

Organization _____ DBA _____

Primary Contact _____ E-mail _____

Business MAILING Address _____ YES NO Is there a carwash at this location?

City _____ State _____ Zip _____

Phone _____ Fax _____

TYPE OF OPERATION(S) Check all that apply and list quantity in space provided.

- Self-Service _____
- High Pressure Automatic _____
- Tunnel _____
- Rollover _____
- Pet Wash _____
- Manufacturer _____
- Distributor _____
- Other _____

TOTAL LOCATIONS _____ TOTAL BAYS _____

OPERATION LOCATION(S)

Please provide physical address and name for each location owned and/or operated by organization.

PLEASE PROVIDE INFORMATION ABOUT OPTIONAL PRODUCTS AND SERVICES OFFERED THROUGH HCA Check all interests..

- | | | |
|--|--|---|
| <input type="checkbox"/> Health/Dental/Vision Insurance | <input type="checkbox"/> Customized Business Forms/Logo Creation | <input type="checkbox"/> Discounted Office Supplies through Staples |
| <input type="checkbox"/> Property and Casualty Insurance | <input type="checkbox"/> Regulatory Decals/Posters | <input type="checkbox"/> Credit Reports |
| <input type="checkbox"/> 401(k)/Cafeteria Plan | <input type="checkbox"/> Credit/Debit Card Processing | |

HCA DUES SCHEDULE

- Carwash Owner/Operator\$125 \$ _____
- Manufacturer or Distributor\$125 \$ _____

DUES PAYMENT OPTIONS.

Check Enclosed

Please Charge My Credit Card Master Card VISA AMEX

Card Number _____

Expiration Date _____ Security Code _____

Signature _____

Address if different from above: _____

