



## APPLICATION FOR MEMBERSHIP

Company Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

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

County: \_\_\_\_\_ State: \_\_\_\_ Zip \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Web Site: \_\_\_\_\_

Email Address: \_\_\_\_\_

Years in business: \_\_\_\_\_ # of wreckers \_\_\_\_\_ Rollbacks \_\_\_\_\_ Hours of Operation: \_\_\_\_\_

Storage Facilities: # of lots: \_\_\_\_\_ # of buildings: \_\_\_\_\_

Scope of Business: Private \_\_\_\_\_ Commercial \_\_\_\_\_ Law Enforcement \_\_\_\_\_

Motor Club \_\_\_\_\_ Other(explain) \_\_\_\_\_

Applicant referred by \_\_\_\_\_

Attached \$200.00 dues for 12 months membership - 2017

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

Date Approved \_\_\_\_\_

### CIRCLE ALL THAT APPLY

- A. Light Duty   B-M. Medium Duty   B-H. Heavy Duty   C. Car Carrier  
D. Landoll Trailer   E. Crane Service   F. Air Cushions   G. Emergency Road Service (Autos)  
H. Emergency Road Service (Trucks)   I. Repair Service (Autos)   J. Repair Service (Trucks)  
M. Manufacturer of Towing Equipment   O. Motorcycle Towing   P. Body Repair  
R. Trucking (Over the Road)   S. Towing Equipment Sales & Service   T. Tire Service  
V. Service Station

Make checks payable to: Towing and Recovery Association of Kentucky Mailing Address: 3311 Collins Lane, Louisville KY, 40245