

**Virginia Limousine Association***The Local Voice of the Chauffeured Transportation Industry*[WWW.VIRGINIALIMOUSINEASSOCIATION.ORG](http://WWW.VIRGINIALIMOUSINEASSOCIATION.ORG)

4911 Turner Road

Richmond, VA 23234

Phone 804.714.0075 Fax 804.714.1282

**2009 MEMBERSHIP  
RENEWAL/APPLICATION**

DATE: JANUARY 20, 2009

COMPANY NAME: \_\_\_\_\_

VLA CONTACT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

**VLA WEBSITE MEMBER LISTING INFORMATION**

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

REGION (select one): Northern | Central | Tidewater | Southwest

**Please Answer The Following Questions To Complete Your Renewal/Application**

If you are operating one or more commercial motor vehicles in interstate and/or intrastate commerce, are you currently in compliance with all federal and state requirements prescribing mandatory minimum levels of public liability insurance coverage?

Yes  No 

Are you currently in compliance with all federal and state motor carrier operating license, certificate or permit requirements? DMV License # \_\_\_\_\_

Yes  No **Print Name:****Signature:**

CHECK ONE	DESCRIPTION	DUES	TOTAL
<input type="checkbox"/>	Professional Member - Owner/operators from the State of VA	<b>\$100</b>	
<input type="checkbox"/>	Associate Member - any person or company other than a owner/operator who is associated with the limousine industry.	<b>\$100</b>	
<input type="checkbox"/>	Affiliate Member – Out of state operators licensed in Virginia	<b>\$100</b>	
	Application Fee		<b>\$25</b>

Make all checks payable to Virginia Limousine Association

If you have any questions concerning this invoice, contact Pam

Tripp, Treasurer VLA, 804.714.0075

TOTAL DUE

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