



MIDWEST CARWASH ASSOCIATION

2017 Associate Membership Form

Company Name \_\_\_\_\_  Renewal  New Member

Other Business Name (if applicable) \_\_\_\_\_

Business Type (check all that apply)

- Conveyor
- In-Bay Automatic
- Oil-Lube
- Chemical Distributor
- Carwash Mfr.
- Equipment Mfr.
- Other \_\_\_\_\_
- Detail Shop
- Self-Serve
- Credit Card Processor
- Insurance Provider
- Soap Mfr.
- POS

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

*(Please provide an up-to-date email to ensure that you receive all MCA communications)*

Operator Member Annual Dues \$150

Supplier/Distributor/Manufacturer Member Annual Dues \$150

**PAYMENT METHOD**

Check payable to MCA    Check # \_\_\_\_\_     VISA     MasterCard     Discover     Amex

Credit Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ Code: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**MAIL FORM AND PAYMENT TO :**

Midwest Carwash Association  
120 N. Washington Square  
Suite 110A  
Lansing, MI 48933  
Or Fax to 517.371.1170

**QUESTIONS?**

Contact Hillary Walilko  
at walilko.h@gcsionline.com  
or call 1.800.610.4512