



Membership Application

Professional Associated Locksmiths of Arizona

Please Print

Personal Information	First Name				Middle Initial		Last Name		Email		
	Street								Apt./Suite		
	City			State		Zip		Home/Cell Phone		DOB	
	Height				Weight				Eye Color		

Business Information	Business Name				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
					Owner	Employee	Mobile	Store		
	Street								Apt./Suite	
	City			State		Zip		Work Phone		

Industry Information	Are you currently active in the locksmith industry?			<input type="checkbox"/>	<input type="checkbox"/>	How did you learn locksmithing/security work?				
				Yes	No					
	If you are currently active in the locksmith industry, for how long (Do NOT include Locksmith School Time)?			Yrs.	Mos.	What Locksmith Schools have you attended?				
	What percentage of work time is spent doing locksmith related jobs?			%						
	Have you ever been convicted of a felony?			<input type="checkbox"/>	<input type="checkbox"/>					
			Yes	No	List any other locksmith associations or trade organizations that you belong to.					
If you have been convicted of a felony, please explain.										

References	First Reference (Vendors, Friends, Other Locksmiths):				Second Reference (Vendors, Friends, Other Locksmiths):			
	Name				Name			
	Address				Address			
	Phone		Email		Phone		Email	

<p>Submit the following as applicable:</p> <ol style="list-style-type: none"> 1. If you are an A.L.O.A. Member, a copy of your A.L.O.A. ID card. 2. Copy of sales tax certificate if you are a business owner. 3. A business card if you are a business owner. 4. If you are an employee, a copy of a recommendation letter from your employer. 5. If you are an Apprentice Member, a copy of your Locksmith School Diploma. 	<p>Dues</p> <p>Yearly Membership Dues: Active or New Members: \$40.00 Auxiliary Member: \$20.00</p>	<p>Submit Application, documentation & fees to:</p> <p style="text-align: center;">Sharon Sacco Membership Chair 530 E. Hunt Highway Suite 103-276 San Tan Valley, AZ 85143</p>
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Membership Office Use Only

No:	Date Rec:	Date Appr:	Appr. By:	Appr. For:
Amt. Rec:	Appl Fee:	Dues:	Rec. By:	