Membership Application

fax 651.290.2266

Or apply online at www.mgta.org

Please type or print clearly. Complete both pages and remit with your payment. Online

| application is availabl | company: Practitioner | ☐ Transitio | | | | |
|----------------------------|--|-----------------------|----------------|--------------------|--|---------------------|
| Business Inforr | ☐ Service Provider ☐ Education | | | | | |
| Organization | | | | | ☐ Student | |
| Address | | | | | | |
| City | | | | | Chassa a sub susu | - (aalaat all t |
| Website | Choose a sub-group (select all t ☐ Global Trade Expert ☐ Global T ☐ Young Professional ☐ Student | | | | | |
| Annual Sales (USD) | | | | | a roung r rolessione | ar a otagont |
| ☐ Less than \$499,000 | □ \$500,000 to \$- | 4,999,000 | Over \$5,000 | 0,000 | | |
| ☐ Cannot disclose / priv | Company Position (check one) | | | | | |
| May we contact you abo | □ Senior Management/Departmer□ Middle Management/Supervisor | | | | | |
| Primary Repres | sentative Inforr | nation | | | ☐ Professional/Non- | Management |
| Required – to be used as | s your primary member | and company conta | act for memb | ership and billing | | |
| purposes. | | | | | | |
| Name | | | | | Choose up to 3 cate your company's bus | _ |
| Title | | | | | Practitioner: | siriess. |
| Phone | | | | | ☐ Manufacturer | |
| Preferred E-Mail | | | | | ☐ Importer | |
| Referred by | | | | | ☐ Exporter | |
| How did you hear about | MGTA? | | | | Service provider: Applications & Tec | ahnalam. |
| | | | | | ☐ Business Develop | |
| Get Involved! Please inc | • • • | ich you would be inte | erested in | | ☐ Carriers (Air, Ocea | |
| volunteering your skills a | and experience. | | | | ☐ Consulting Service | es |
| Communications | Education | ☐ Finance | ☐ Forums | S | ☐ Customs Broker | |
| ■ Membership | Leadership | Networking | □ Govern | nment Relations | ☐ Drayage | |
| | | | | | ☐ Engineering☐ Financial Services | |
| Payment Option | | | | | ☐ Foreign Trade Zon | |
| Amount Enclosed \$ | | | | | ☐ Global Logistics S | |
| | | | | | ☐ Global Sourcing | |
| Payment Option: | | | | | ☐ Government Entity | • |
| ☐ Check (payable to MC | ☐ Check (payable to MGTA) ☐ Visa ☐ MasterCard ☐ Insurance & Surety Services ☐ Legal Services | | | | | |
| Cardholder Name | | | | | ☐ Port | |
| Card Number | | ☐ Recruiter | | | | |
| Exp. Date | ☐ Testing & Certification | | | | | |
| Authorized Signature | | | | | ☐ Translation/Interpr | eter Services |
| | | | | | | |
| Credit Card Billing Addre | | | | | Membership | Options |
| Credit Card Billing City/S | State/Zip | | | | (Please check one) | |
| | | | | | Organization | |
| Please return for | m to: | | (For office us | | | \$250) 🗖 (3 rep. |
| Midwest Global T | | initials | | fin. | | \$450) 🗖 (5 rep. |
| 1000 Westgate Dr | | date | | | ■ Whole Organizatio | |
| St. Paul, MN 5511 | · | CK/CC | | | □ University/College | - \$200 per y |
| fax 651 290 2266 | | amt. paid | | | ☐ Individual – \$150 | per year |

bal. due

Choose a primary category for you or your mpany: Practitioner ☐ Transition* Service Provider ☐ Educational Affiliate Student oose a sub-group (select all that apply): Global Trade Expert Global Trade Leader Young Professional Student mpany Position (check one) Senior Management/Department Head Middle Management/Supervisor Professional/Non-Management oose up to 3 categories that best define ur company's business. actitioner: Manufacturer Importer Exporter rvice provider: Applications & Technology **Business Development & Marketing** Carriers (Air, Ocean, Trucking) Consulting Services Customs Broker Drayage Engineering Financial Services Foreign Trade Zone (FTZ) Operators Global Logistics Services Global Sourcing Government Entity Insurance & Surety Services Legal Services Port Recruiter **Testing & Certification**

ease check one) ganization

□ (2 reps: \$250) □ (3 reps: \$350)

☐ (4 reps: \$450) ☐ (5 reps: \$550)

Whole Organization - \$650 per year

University/College - \$200 per year

☐ Student – \$25 per year

Membership Application (continued)

Additional Representative Information

| Company Name: | | | | | | | | | | | |
|---|-----------------------------|---|------------------------------|--|--|--|--|--|--|--|--|
| Corporate membership levels include additional representatives. Please provide information about your additional representatives. Need more space? Copy this page as often as you need. | | | | | | | | | | | |
| Name | | | | | | | | | | | |
| Title | | Company Position (check one) ☐ Senior Management/Department Head | | | | | | | | | |
| Phone | | | | | | | | | | | |
| Preferred E-Mail | | ☐ Middle Management/Supervisor | | | | | | | | | |
| Treferred E Mail | | | | ☐ Professional/Non-Management | | | | | | | |
| Get Involved! Please indicate the area(s) in which you would be interested in | | | | | | | | | | | |
| volunteering your skills | | | | | | | | | | | |
| □ Communications | ☐ Education | ☐ Finance | ☐ Forums | Choose a sub-group (select all that apply): | | | | | | | |
| ☐ Membership | ☐ Leadership | □ Networking | ☐ Government Relations | ☐ Global Trade Expert ☐ Global Trade Leader | | | | | | | |
| ■ Wembership | L eadership | T Networking | a dovernment riciations | ☐ Young Professional ☐ Student | | | | | | | |
| | | | | | | | | | | | |
| Name | | | | Commony Position (chack and) | | | | | | | |
| Title | | | Company Position (check one) | | | | | | | | |
| | | | | ☐ Senior Management/Department Head | | | | | | | |
| Preferred E-Mail | | | | ☐ Middle Management/Supervisor | | | | | | | |
| | | | | ☐ Professional/Non-Management | | | | | | | |
| Get Involved! Please in | dicate the area(s) in w | hich you would be inte | erested in | | | | | | | | |
| volunteering your skills | and experience. | | | Choose a sub-group (select all that apply): | | | | | | | |
| Communications | Education | □ Finance | ☐ Forums | ☐ Global Trade Expert ☐ Global Trade Leader | | | | | | | |
| ■ Membership | Leadership | Networking | Government Relations | ☐ Young Professional ☐ Student | | | | | | | |
| | | | | Company Position (check one) ☐ Senior Management/Department Head ☐ Middle Management/Supervisor ☐ Professional/Non-Management | | | | | | | |
| volunteering your skills | and experience. | | | Choose a sub-group (select all that apply): | | | | | | | |
| □ Communications | ■ Education | □ Finance | ☐ Forums | ☐ Global Trade Expert ☐ Global Trade Leader | | | | | | | |
| ■ Membership | ☐ Leadership | ■ Networking | ☐ Government Relations | ☐ Young Professional ☐ Student | | | | | | | |
| Name Title Phone Preferred E-Mail | | | | Company Position (check one) ☐ Senior Management/Department Head ☐ Middle Management/Supervisor ☐ Professional/Non-Management | | | | | | | |
| Get Involved! Please indicate the area(s) in which you would be interested in volunteering your skills and experience. Choose a sub-group (select all that apply): | | | | | | | | | | | |
| ☐ Communications | and experience. ☐ Education | ☐ Finance | ☐ Forums | Choose a sub-group (select all that apply): | | | | | | | |
| ☐ Membership | □ Leadership | ☐ Networking | ☐ Government Relations | ☐ Global Trade Expert ☐ Global Trade Leader | | | | | | | |
| - Memberanh | Leadership | - Networking | - Government netations | ☐ Young Professional ☐ Student | | | | | | | |