



Safety Program

Employee Count	Member Rate	Non-Member Rate
1 Employee	\$1,500.00	\$2,000.00
2 Employees	\$2,030.00	\$2,530.00
3-5 Employees	\$3,060.00	\$3,560.00
6+ Employees	\$3,360.00 + \$300.00 for each additional employee above 6	\$3,860 + \$300.00 for each additional employee above 6
Dues Cap	\$16,560.00	\$17,060.00

Membership is for the calendar year, with dues paid quarterly. This dues structure is current but is subject to change at the discretion of the Minnesota Telecom Alliance Safety Committee.

Application for Membership

Company Name: _____
 Address: _____ City: _____ State: _____ ZIP: _____
 Contact Person: _____
 Phone: _____ Fax: _____
 Email: _____
 Start Date: _____

Number of full-time employees:
 Management employees: _____
 Office/clerical employees: _____
 Technical/plant employees: _____
 Total number of employees: _____

Total Safety Program Dues Invoiced: \$. _____

Refer to dues structure above. Membership is for the calendar year, with dues paid quarterly.

Return this application and dues remittance to:
 Minnesota Telecom Alliance
 1000 Westgate Drive, Suite 252
 St. Paul, MN 55114
 P: 651-291-7311 | F: 651-290-2266
 www.mnta.org

(For office use only)

initials		fin.
date		
CK/CC		
amt. paid		
bal. due		