



(Please check the appropriate category of membership)

<input type="checkbox"/> Telecommunications Provider	(Annual dues based on company size)
<input type="checkbox"/> Associate Member	(Annual dues = \$350.00)
<input type="checkbox"/> Premier Associate Member	(Annual dues = \$1,000.00)

Company Name **Date Formed**

Street and Mailing Address

City, State and Zip

Phone Number **Fax Number**

Names and Title of Principals

Name and Title of Northwest Representative

Address (if different from above)

Phone Number **Fax Number**

E-Mail Address **Web Page Address**

Description of Telecommunications Products and Services Offered:

Geographic Area Served

Name, title and e-mail address of person to receive OTA correspondence, event mailings & eNewsletter

Name, title, phone & e-mail address of person to receive dues invoices and directory update requests

Send to: OTA • 777 13th Street, S.E. – Suite 120 • Salem, OR 97301-4038
Voice (503) 581.7430 • Fax (503) 581.7457