



## 2024 Membership Application

Please fill out and mail to:  
Pennsylvania Towing Association  
P.O. Box 61488  
Harrisburg, PA 17106

Questions?  
Call 814-548-6023  
[www.patowing.com](http://www.patowing.com)

Membership Classes (select one)	Annual Dues
<input type="checkbox"/> REGULAR     A business engaged in towing in Pennsylvania.	\$440
<input type="checkbox"/> AFFILIATE     Employee of a regular member or a towing company from outside of Pennsylvania.	\$90
<input type="checkbox"/> ASSOCIATE     Company associated with the towing industry that is not a Pennsylvania towing company.	\$600

Please include a check made payable to "Pennsylvania Towing Association" for the proper amount.  
Please print and fill out all the applicable information in order to be enrolled.

### YOUR INFORMATION:

Owners Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website Address: \_\_\_\_\_

Yes, I'd like to receive e-mails from the Pennsylvania Towing Association about upcoming events and other information.

### PTA MEMBERSHIP PLEDGE:

I pledge my personal efforts and those of my business:

- To foster and promote the interest and welfare of my fellow registered towing/storage/recovery operators.
- To support and create fair competition in all business dealings.
- To foster and support the enactment of wise and uniform legislation as the same may affect the interest of this industry.
- To seek to eliminate unfair, unethical, and destructive business practices within the industry.
- To conduct business in a professional manner that will reflect favorably upon the image of the industry.

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

Date: \_\_\_\_\_