

TOWING & RECOVERY

ASSOCIATION OF WASHINGTON

"The Power of a Team"

ASSOCIATE MEMBERSHIP APPLICATION

The Towing and Recovery Association of Washington (T.R.A.W.) was organized in 2005 by towing, recovery and storage business owners to represent the interests of the towing industry; previously recognized as WTTA since 1958. T.R.A.W. stands as the authority on the towing industry and represents its interests in governmental and legal affairs. T.R.A.W. promotes a profitable operating climate for tow operators by working with WA State Patrol, WA Department of Transportation, WA Department of Licensing, the WA Legislature, and other organizations directly or indirectly related to the towing business.

Please join us and together we will:

1. Represent the legal and business interests of the towing, recovery, and storage industry in the legislative and regulatory arena at the federal, state and local level.
2. Provide business-related services to support and assist owners or create partnerships.
3. Promote professionalism and ethics in the towing industry.
4. Promote and provide education to both owners and employees.
5. Communicate within and outside the industry by providing information and networking opportunities.

The bylaws as adopted by the T.R.A.W. board provide for a class of membership known as Associate members. This class shall include those firms and individuals who supply, do business with, or contract with the towing industry. Associate members have the right to attend meetings, use the logo, receive mailings, and serve as advisors to committees. Associate members are non-voting members. ***Will you join us?***

Company Name: _____

UBI# : _____ Primary Business/Products: _____

Contact Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Company Website: _____

Please provide a logo image file (jpeg, png or vector) for use in our advertising and on our website

Associate Dues = \$475 per company annually

(Membership valid January 1st – December 31st and dues are not prorated)

Circle your choice: **CHECK INCLUDED** OR **CREDIT CARD PAYMENT** (T.R.A.W. Office will contact you)

Printed name on card: _____ Billing zip code: _____

Signature on card: _____ Today's Date: _____

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