



MEMBERSHIP APPLICATION

Type of organization you represent:

Thermal Spray Contractor Academic Institution Equipment/Consumables Supplier Other: _____

COMPANY NAME: _____

ADDRESS: _____

CITY/STATE: _____

COUNTRY: _____ POSTAL CODE: _____

TELEPHONE: _____ EMAIL: _____

WEBSITE: _____

MAILING ADDRESS (IF DIFFERENT THAN ABOVE):

ADDRESS: _____

CITY/STATE: _____

COUNTRY: _____ POSTAL CODE: _____

COMPANY REPRESENTATIVE

Principal Contact (ITSA Company Representative)*

*LAST NAME: _____ FIRST NAME: _____

JOB TITLE: _____ EMAIL: _____

PHONE: _____

LAST NAME: _____ FIRST NAME: _____

JOB TITLE: _____ EMAIL: _____

LAST NAME: _____ FIRST NAME: _____

JOB TITLE: _____ EMAIL: _____

LAST NAME: _____ FIRST NAME: _____

JOB TITLE: _____ EMAIL: _____

LAST NAME: _____ FIRST NAME: _____

JOB TITLE: _____ EMAIL: _____

ADDITIONAL INFORMATION

YEAR ESTABLISHED: _____

TOTAL EMPLOYEES: _____

SALES PER YEAR:

- Less than \$1,000,000
- \$1,000,000 to \$5,000,000
- \$5,000,000 to \$10,000,000
- More than \$10,000,000
- Membership

TYPE(S) OF EQUIPMENT OWNED:

- Plasma HVOF Oxy/Fuel Powder Cold Spray
- Rokide Arc Wire Other: _____

BRANCHES OR SUBSIDIARIES:

- Yes No (If Yes, please list below)

Branches or Subsidiaries:

What percentage of your activity is thermal spray related? _____ %

Number of sales staff promoting thermal spray? _____

ANNUAL DUES:

REGULAR MEMBER: \$1,115 ANNUALLY (**Plus a one-time \$250 initiation fee**)
(INCLUDES AN AWS SUPPORTING COMPANY CORPORATE MEMBERSHIP)

*Regular membership shall be extended to companies directly involved in the application of thermal spray coatings and companies who manufacture or distribute thermal spray equipment, supplies, or allied supplies to the thermal spray industry.

RESEARCH ASSOCIATE MEMBER: \$300 ANNUALLY

*Research Associate membership shall be extended to organizations/consultants involved in scientific research and development related to the thermal spray industry.

Please check the appropriate box:

- Regular Member
- Research Associate Member
- Optional: High-gloss mahogany wood plaque with engraved, company name plate - \$99
Note: ITSA Membership comes with paper certificate. Mahogany wood plaque is an upgrade.

Payment

- My check/money order, made out to the American Welding Society is enclosed

Card Type _____

Card Number _____

Expiration Date _____

Cardholder Name _____

CVV _____

Authorized Signature _____

Total Amount: \$ _____

Please return this application to:
Mail: AWS – Attn: Adrian Bustillo
8669 NW 36 St. #130
Miami, FL 33166

Email: abustillo@aws.org