



www.AutoPaintersAssoc.com
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(866) 809-6060

Enrollment Form

**Membership dues are \$100 per year per location enrolled.
Only Franchisee Owners may become members.**

Please complete this form and mail it along with your membership dues (\$100 / location) payable to
Auto Painters Association
PO Box 5
Davis, CA 95617

Or if paying by credit card please fax to (866) 863-8268

Do you wish your enrollment to be kept confidential at this time? (circle one)

YES

NO

Name: _____

Store Number: _____

Store Street Address: _____

Store City, State & Zip: _____

E-Mail address: _____

Best Phone Number: _____

Signature: _____

If paying dues by credit card please complete the following:

Credit Card # _____ Exp. _____ Code: _____