

MAVTI
Michigan Association of Vehicle Theft Investigators
P.O. Box 501
Dearborn, MI 48121
Tax ID # 38-3573647

APPLICATION FOR RENEWAL MEMBERSHIP

(If nothing has changed since last year, just complete Items 1 and 2.)

(1) Name _____

Agency/Company Name _____

Address _____ City _____

State/Province _____ Zip/Postal Code _____

Occupation _____ Rank/Title _____

Retired From (if applicable) _____

Home Phone: Area Code _____ Number _____

Work Phone: Area Code _____ Number _____

Fax Number: Area Code _____ Number _____

E-mail Address _____

Do you want a membership card? _____

Mail completed application, along with check or money order, to above address.

Dues: \$20 for one-year membership. Make check or money order payable to: MAVTI
All payments in U.S. Dollars. All memberships are for the calendar year.

I hereby apply for membership in the Michigan Association of Vehicle Theft Investigators (MAVTI) and agree to abide by the association bylaws.

(2) SIGNATURE _____ DATE _____