



**THE EXPEDITE ASSOCIATION OF NORTH AMERICA
MEMBERSHIP APPLICATION**

PLEASE COMPLETE AND RETURN TO:

TEANA, 100 North 20th Street, Suite 400, Philadelphia, PA 19103

Phone: (215) 320-3880 Fax: (215) 963-9785

E-MAIL: info@teana.org WEBSITE www.teana.org

Date _____

Company Name _____

What year did your company open up for business? _____

Submitted By (Key Contact) _____ Title _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

E-mail Address _____ Website _____

Please list 3 Sponsors (must be current TEANA Expediting Members – Visit the TEANA Website and view the Membership List to see who is a current member of TEANA):

COMPANY	NAME	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any other principal Company Officials that you would like to will receive emails from TEANA:

Name	Title	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____

How did you learn about TEANA?

We are applying for the following membership status as marked and meet the eligibility requirements as stated:

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EXPEDITING MEMBER CATEGORY (please check which level your company is)

TEANA will not disclose any Members dues category. This information is kept confidential and you will have the opportunity to update it every year.

- \$600 annual dues (Under \$2,000,000 in revenue)
- \$750 annual dues (\$2,000,001 to \$10,000,000 in revenue)
- \$1,200 annual dues (\$10,000,001 to \$19,999,000 in revenue)
- \$2,000 annual dues (\$20,000,000 plus in revenue)

To apply for Expediting Membership your company must meet the following requirements and has the right to vote in Association matters and shall be referred to as an Expediting Member. All representatives from Expediting Member Companies are eligible to hold office within the Association.

1. There are no minimum or maximum number of vehicles for expediting your company has to have.
2. Your company has to have been in business for at least three years.
3. Your company must adhere to freight-sharing principles.
4. The company agrees that it is the policy of this association and its members to comply fully with the antitrust and trade regulation laws of the United States Federal Government and of the various states.
5. The company agrees to maintain all necessary insurance coverage and bonds as required to broker freight and haul freight on behalf of other brokers and/or carriers.
6. The member company must maintain ethical business practices as established from time to time by TEANA's Board of Directors. As guidelines these practices may include no back selling or soliciting, prompt payment, and adherence of freight sharing principles as adopted including cargo insurance.
7. The company will make an effort to have at least one person attend the annual conference.

If applying for **Expediting Membership** please provide the following:

DOT # _____ CVOR # _____ SCAC Code _____

Within your Company, how many trucks are used for expediting? _____

ASSOCIATE MEMBER - Annual Dues \$750

Associate Members include brokers, freight suppliers, and other non-asset companies which expedite. Associate Members must meet the same standards as Voting Members and maintain a standard of conduct consistent with the TEANA ethical guidelines. All representatives from Associate Member Companies are eligible to hold office within the Association.

If applying for **Associate Membership**, please provide the following: Brokerage #, if applicable _____

AFFILIATE MEMBER - Annual Dues \$750

Affiliate Members are companies or individuals who sell products to Expediting Members or employ the services of these Members, such as members of the trade press.

By signing below, I am hereby consenting to receive all mass communications from TEANA and its affiliates that may be sent via mail, e-mail or fax. I also understand that TEANA will not share my content information without my consent. I also certify that our company meets the Membership Eligibility Requirements, the information given above is correct and that I will abide by the Association's Code of Ethics.

(Please read the Code of Ethics: <http://www.teana.org/ethics> before signing)

Signature _____ Title _____

Form of Payment:

Check # _____ Amount Paid _____

Credit card: (circle one) Visa MasterCard American Express

CC# _____ Exp. Date _____ Approved Amount\$ _____

Name on Card _____

NOTE: Please submit your TEANA Membership Applications with the appropriate dues payment attached. Checks should be made payable to TEANA and stapled to your application when submitted for consideration.

Please list contact information for any prospective members of TEANA:

Company: _____

Company: _____

Contact Name: _____

Contact Name: _____

E-mail: _____

E-mail: _____

Phone: _____

Phone: _____

*NOTE: Your membership application must be approved by the TEANA Board of Directors.
Please allow 3-5 Business Days for a Response.*

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