



Southern Arizona Logistics

Education Organization

P.O. Box 26861, Tucson, AZ, 85726
(520) 977-3626

E-mail membership@saleo.org

Membership Application

Complete this form and return it with your payment by mail to the Southern Arizona Logistics Education Organization at the contact information listed above.

Member Information

Name

First Name _____ Middle Name/Initial _____

Last Name _____

Business Information

Company Name _____

Job Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Extension _____ Fax _____

E-mail _____ Website _____

Home Information (optional)

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Type of Business

(Check all that apply)

- Aerospace & Defense
- Air Service
- Bank/Legal
- Blocking & Bracing
- Crating/Packaging
- Cross Docking Services
- Customs Broker – U.S.
- Customs Broker– Mexico
- Education
- Fork Lift Training
- Freight Forwarder – Domestic
- Freight Forwarder – International
- Hazardous Materials
- Heavy & High Wide Hauling
- Household Goods Mover
- Manufacturing
- Mining
- Ocean freight
- Passenger Transportation
- Rail Service
- Retiree
- Student
- Software Technology
- Third Party Logistics (3PL)
- Truck Driver Training
- Truck Service Long Haul
- Truck Service Short Haul
- Truck Service LTL
- Transportation Consulting
- Transportation Law
- Warehousing & Distribution
- Workforce Development
- Other _____

Mailing/Listing Information

Where do you want SALEO E-mail delivered?

Business

Home

Please continue on page two (back)

Do you want be listed in the membership directory? Yes No

Name: _____

Referral

Were you referred to the SALEO organization by a member? Yes No

If yes, what is the member's name? _____

Involvement

Are you interested in volunteering? Please check all that apply: With events, With the newsletter, With advertising, With membership, With the Expo, With annual awards event, Scholarship, With Workshops, Scholarship Tournament

Would you be interested in being on the election ballot for a position as an officer or Board of Directors? Yes No

Are you interested in advertising or sponsoring at SALEO events? Yes No

Are you interested in contributing to the Scholarship Fund? Yes No

Membership Type

Please check one: Regular membership \$50.00, Retiree membership \$10.00, Corporate Membership 2= \$90, 3= \$130, Each Additional \$35, Total \$, Student membership \$10.00: School?, Additional Scholarship Donation \$

Payment Options

Amount Enclosed: \$ SALEO Tax Exempt ID: 01- 0899845

Check (Payable to SALEO)

VISA/ Master Card Discover American Express

Name on Card (Please Print)

Card Number Exp. Date Billing Zip Code

X Authorized Signature

Agreement

The undersigned hereby makes application for membership in the Southern Arizona Logistics Education Organization. Membership shall be renewed each calendar year. Memberships are not

transferable to another person, cannot be prorated, or refunded. Applications without valid payment information will not be processed.

I agree to abide by the Rules and By-Laws of **SALEO** and such rules and regulations as may be officially declared from time to time. I authorize **SALEO** to send announcements and information to my e-mail address.

Signature X _____ Date: _____