



# REGULAR TRANSIT MEMBER APPLICATION

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Website: \_\_\_\_\_

### PRIMARY CONTACT

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### ADDITIONAL CONTACTS

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## MEMBERSHIP DUES

Regular Members Total Transportation Operating Expenses:

- more than \$500 Million . . . . . \$11,000
- from \$50 Million to less than \$500 Million . . . . . \$7,700
- from \$20 Million to less than \$50 Million . . . . . \$5,500
- from \$10 Million to Less than \$20 Million. . . . . \$4,400
- from \$7.5 Million to less than \$10 Million. . . . . \$3,300
- from \$5 Million to Less than \$7.5 Million . . . . . \$2,970
- from \$2.5 Million to Less than \$5 Million . . . . . \$2,200
- from \$1 Million to Less than \$2.5 Million . . . . . \$1,430
- from \$500,000 to Less than \$1 Million. . . . . \$770
- Less than \$500,000 . . . . . \$330

AMOUNT ENCLOSED: \$ \_\_\_\_\_

<input type="checkbox"/> Fixed Route	No. in fleet _____
<input type="checkbox"/> Paratransit	No. in fleet _____
<input type="checkbox"/> Other	No. in fleet _____
No. of Full-Time Employees: _____	
No. of Part-Time Employees: _____	

Method of Payment:

- VISA    MASTERCARD    DISCOVER    AMEX
- Check (Payable to PPTA)

Card# \_\_\_\_\_ Expires \_\_\_\_/\_\_\_\_

Cardholder Signature \_\_\_\_\_

**Return by mail to: PPTA, 600 North Third Street, Harrisburg, PA 17101-1113  
or FAX to: 717-234-7176 • or email to: Lmacwilliams@ppta.net**