



# MEMBERSHIP APPLICATION

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Sponsoring Member: \_\_\_\_\_

Type of Membership () Attached is a check payable to AVDA for \$ \_\_\_\_\_

## ACTIVE MEMBERSHIP

A vessel documentation business whose principal means of livelihood is derived from providing such services (statutory member).

**Annual Dues: \$150 plus one time application fee: \$100**

Name of Representative: \_\_\_\_\_ Name of Alternate: \_\_\_\_\_

### CRITERIA FOR MEMBERSHIP

1. Provide proof of existence as a separate entity (tax id number, checking account, certificate of business, etc.) whose primary source of income is from documentation.
2. Minimum of two consecutive years of experience is required. Attach a brief resume detailing what this experience encompasses (time spent working with Coast Guard forms, amount of time spent preparing vessel files for closing, for filing with Coast Guard, kinds of vessel files worked on; verification of coordination with brokers, owners, banks, etc.).
3. Written references: one from a current active AVDA member and one from a marine-related entity.
4. Type (Proof) of Insurance applicant has detailing the coverage and limits included and effective dates; attach a copy of the declaration page.
5. I state that I am of good moral character and that the named applicant conducts its affairs in an honest, trustworthy and reputable manner; applicant has not been convicted of a crime of moral turpitude.

Signature: \_\_\_\_\_ Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

## AFFILIATE MEMBERSHIP

A person or entity engaged in a marine-related business, other than a vessel documentation service, i.e., marine lender, maritime attorney, yacht broker, marine surveyor, marine insurer (non-statutory member).

**Annual Dues: \$250 plus one time application fee: \$100**

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

### CRITERIA FOR MEMBERSHIP

1. Written referral from a current Active AVDA member.
2. I state that I am of good moral character and that the named applicant conducts its affairs in an honest, trustworthy and reputable manner; applicant has not been convicted of a crime of moral turpitude.

Signature: \_\_\_\_\_ Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

## ASSOCIATE MEMBERSHIP

A person or entity engaged in a marine-related business (i.e., marine lender, maritime attorney, yacht broker, marine surveyor, marine insurer) who also engages in some vessel documentation business (non-statutory member).

**Annual Dues: \$500 plus one time application fee: \$100**

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

### CRITERIA FOR MEMBERSHIP

1. Written referral from a current Active AVDA member.
2. I state that I am of good moral character and that the named applicant conducts its affairs in an honest, trustworthy and reputable manner; applicant has not been convicted of a crime of moral turpitude.

Signature: \_\_\_\_\_ Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

## SUPPLEMENTAL INFORMATION

E-MAIL: \_\_\_\_\_  
www ADDRESS: \_\_\_\_\_

OTHER AFFILIATIONS: \_\_\_\_\_

OFFICE 2 ADDRESS: \_\_\_\_\_

OFFICE 2 TEL & FAX: \_\_\_\_\_

OFFICE 3 ADDRESS: \_\_\_\_\_

OFFICE 3 TEL & FAX: \_\_\_\_\_

INTERESTS/HOBBIES: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TEL: \_\_\_\_\_

**American Vessel Documentation Association, Inc.**

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