



2008-2009 Membership Renewal Form

Please PRINT or TYPE all information

	Member Company	Primary Company Representative
Company	_____	Name: _____
Address	_____	Title _____
	_____	Phone _____
City, ST	_____	Fax _____
Zip	_____	Email _____

Regular Membership: \$2,000

Fax Agreement: The PSA has my permission to send materials by fax.

Signature _____

The Photoluminescent Safety Association (PSA) is incorporated and organized as a business league as that term is used in Section 501(c)(6) of the Internal Revenue Code of 1954. None of the 2006 dues will be used to engage in any lobbying activities. Because no portion of the PSA's annual membership dues is used for the purpose of lobbying, the full amount of your dues payment is deductible as an ordinary and necessary business expense.

Photoluminescent Safety Association Federal ID#: 02-0778825 (Exempt)

Please make check payable to and mail with this form to:

Photoluminescent Safety Association
2001 Jefferson Davis Highway, Suite 1004
Arlington, VA 22202-3617