



Philadelphia Regional Limousine Association

P.O. Box 653

Richboro, Pa 18954-0653

Application Date: _____ **Association Sponsor:** _____

Company Name: _____

Legal Name: _____

Type of Business: Partnership [] Sole Proprietorship [] Corporation [] Other []

If you marked other, please explain: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Please list physical site of vehicle storage if different from mailing address below:

Physical Address: _____

City: _____ **State:** _____ **Zip:** _____

Primary Phone #: _____ **Ex:** _____

Toll Free Phone#: _____ **Ex:** _____

Facsimile Phone#: _____

Website Address: _____

Primary Email Contact: _____

Who will attend PRLA meetings upon your Companies Behalf?

Name: _____ **Phone#:** _____

Email Address: _____

Name: _____ **Phone#:** _____

Email Address: _____

Name: _____ Phone#: _____

Email Address: _____

Company Operating Certifications

The PRLA endeavors to provide the best public image for all of its membership for both safety and regulation. In emphasizing these public needs, the PRLA requests all current & potential members to provide documentation for the following operating requirements to do business both in the state of Pennsylvania, and beyond:

Licensing Information

US DOT #: _____ I.C.C. #: _____

Pa PUC #: _____ PPA #: _____

Insurance Information

Policy #: _____ Company Name: _____

Policy Inception Date: _____ Policy Expiration Date: _____

Agent Name & Phone#: _____

Fleet Description

Vehicle Type	Quantity	Amount	Vehicle Type	Quantity	Amount
Sedans	_____	_____	Limo buses	_____	_____
Non-Stretched SUV's	_____	_____	Minibus (15 pass Plus)	_____	_____
Passenger Vans (14 pass Max.)	_____	_____	Trolley	_____	_____
Limousines (6 Pax thru 10 Pax)	_____	_____	Classic Exotics	_____	_____
Stretch SUV's	_____	_____	Motor coaches	_____	_____
Para-Transit	_____	_____	Other	_____	_____

Affiliations

Are you a member of the National Limousine Association (NLA)? YES NO

Are you a member of the Taxicab Livery Para transit Association (TLPA)? YES NO

Is your company a member of any other Livery Association not mentioned? YES NO

If you answered YES, please list the Association('s): _____

Are you a member of your local Chamber of Commerce?

YES

NO

If you answered YES, please list the chapter ('s): _____

Membership Fees

0 – 10 Vehicles \$150.00 [] 11 – 49 Vehicles \$300.00 [] Over 50 Vehicles \$500.00 []

Association Membership Fee \$300.00 []

As an Association Member, you are entitled to attend all meetings, but do not have any voting power during judicial process of meeting votes.

Vendor Membership Fee \$500.00 []

A vendor member will be allowed to come to all meetings, hand out literature, will have a direct website link to their website and is encouraged to provide membership with discounted services.

Platinum Vendor Membership Fee \$2000.00 []

As a platinum vendor you are entitled to (2) two meetings per year where you are given a 20-minute block of time to speak about your company to the membership. Also, this membership is paid for two years.

Total Membership Fee: \$ _____

Membership Agreement

I, AS A MEMBER OF THE PHILADELPHIA REGIONAL LIMOUSINE ASSOCIATION, DO AND WILL COMPLY WITH ALL LOCAL, STATE, & FEDERAL LAWS & REGULATIONS. I WILL ALSO ENDEAVOR TO COMPLY WITH ALL BY-LAWS OF THE PHILADELPHIA REGIONAL LIMOUSINE ASSOCIATION AND BE OF PROPER CONDUCT DURING ALL P.R.L.A FUNCTIONS. FAILURE TO NOT COMPLY WITH BY-LAWS WILL BE SUBJECT TO BOARD REVIEW AND/OR MEMBERSHIP TERMINATION FROM THE PHILADLEPHIA REGIONAL LIMOUSINE ASSOCIATION.

Signature: _____ Date: _____ Title: _____

Membership Review

Date Received: _____ Sponsor: _____

Date Voted: _____ Accepted: _____ Denied: _____

Executive Officer Approval Signature: _____

Payment Type: Cash Credit Card Check Membership

Credit Card #: _____ CSC# _____ Exp# _____

Check # _____ Cash Amount _____

Treasurer Approval Signature: _____