

# SAIL AMERICA MEMBERSHIP APPLICATION

**CLICK HERE TO  
SUBMIT**



## 1. COMPANY / CONTACT INFORMATION

Membership Name (Company): \_\_\_\_\_

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

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

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

**Primary Contact:** This person is responsible for your SA membership; updating contact information and routing SA communication. SA communicates most frequently with this person.

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

**Additional Contacts:** If you would like additional contacts added to your account, specifically your companies boat show contact.

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

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

**SOCIAL MEDIA PAGE LOCATIONS:** Twitter:@ \_\_\_\_\_ Instagram: \_\_\_\_\_

Facebook: \_\_\_\_\_ LinkedIn: \_\_\_\_\_

## 2. MEMBERSHIP DUES

### CORPORATE MEMBERSHIP

Your membership dues are based on the total U.S. sailing-related marine sales for your company's most recently completed fiscal year. Please check the appropriate membership category.

ANNUAL SAILING RELATED SALES	SAIL AMERICA MEMBER DUES
Under \$250,000	<input type="checkbox"/> \$250
\$250k - \$499,000	<input type="checkbox"/> \$350
\$500k - \$999,000	<input type="checkbox"/> \$500
\$1 million - \$10 million	<input type="checkbox"/> \$800
\$10 million - \$20+ million	<input type="checkbox"/> \$1200

### ASSOCIATE MEMBERSHIP

Associate membership is for individuals or companies that provide a service to the sailing industry. Associate members pay a flat annual fee and receive all the benefits of Sail America membership, except discounted member rates at shows and access to the Discover Sailing list.

Individual Membership.....\$50  
 Non-Profit Organizations.....\$75  
 Dealers, Brokers, Marine Representatives, Sailing Schools and Professional Memberships.....\$150  
 Affiliated Corporate Membership (Corporate Member: \_\_\_\_\_).....\$100

## 3. MEMBERSHIP DUES PAYMENT INFORMATION

TYPE OF PAYMENT: (please check one)  Mastercard  Visa  Check \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_ Card Holder's Name: \_\_\_\_\_

Please email your application form to [acuomo@sailamerica.com](mailto:acuomo@sailamerica.com) or click **HERE**  
**50 Water Street | Warren, RI 02885 | (p) 401-289-2540 | SailAmerica.com**