



National Association of Emergency Vehicle
Technicians

151 LEXINGTON ROAD SHIRLEY NY 11967
1-800-446-2388

E-Mail: adminassist@naevt.org
<http://www.naevt.org>

NAEVT Membership Application

Please complete and mail to:

NAEVT
151 LEXINGTON ROAD
SHIRLEY, NY 11967

Annual membership dues
(\$50.00 - Class 1 & 2, \$400.00 - Class 3)
must accompany application.

Name _____

Position _____

Affiliation _____

Home Address _____

City _____ State _____ Zip _____

Business Phone (____) _____ Home Phone (____) _____

Fax _____ E-Mail _____

Amount Enclosed (US Funds) \$ _____

Membership Classification

(Check one only)

_____ Class 1 Municipal

_____ Class 2 Individual

_____ Class 3 Corporate

Payment Method:

_____ Check or Money Order Payable to NAEVT

_____ Mastercard _____ Visa

Credit Card # _____

Expiration Date _____
Signature _____

How did you hear about NAEVT?

_____ Please send More Information Only

_____ *"Professionalism Through Training"* _____