



WOMEN IN TRUCKING

DRIVER

Membership Application

www.WomenInTrucking.org

888.464.9482

Check One: New Member Renewal

Membership Type; Check One:

Student: \$15 (first year dues only)

Professional Driver: \$30 - 1 year; \$55 - 2 years; \$80 - 3 years Complete Box 1 below.

Professional Driver PLUS Mate: \$40 - 1 year Complete Box 1 & 2 below.

Your spouse or partner is included for an additional \$10/year.

Retired/Disabled: \$10

Box 1: Professional Driver Information

Name: _____ Referred by: _____

Mailing Address - Street: _____

City, State/Province, Zip/Postal Code: _____

Email: _____ Telephone No: (_____) _____

Birth Date (month, date, year): _____

Number of Years Driving Professionally: _____

Company Driver; Name of Company: _____

Owner-Operator; Leased to: _____

Check all that apply: Solo Team Gender Identification: Female or Male or Non-Binary

I am a Certified Woman-Owned Business (WBE)

Box 2: Mate Information (only complete if mate is also becoming a member)

Name: _____

Email: _____ Telephone No: (_____) _____

Birth Date (month, date, year): _____

Number of Years Driving Professionally: _____

Company Driver; Name of Company: _____

Owner-Operator; Leased to: _____

Check all that apply: Solo Team Gender Identification: Female or Male or Non-Binary

I am a Certified Woman-Owned Business (WBE)

Payment Information (U.S. Funds)

I wish to add \$_____ for a tax deductible donation to the Women In Trucking Foundation.

MasterCard Visa American Express Cash Check payable to Women In Trucking

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Address where credit card statement is mailed: _____

Signature: _____ Print Name: _____

Check or money order, mail to: Women In Trucking, PO Box 400, Plover, WI 54467-0400, USA

Credit card payment, scan and email to: WIT@womenintrucking.org

For Office Use: Person receiving application _____ Amount Paid \$ _____

Verify: New/Renewal • Membership Type • Payment Method (credit card, cash, check)