



Application for ISTAT Corporate Membership

Please complete and submit with payment.

Name: _____ Title: Mr./Ms./Dr. (circle one)

Job Title: _____

Company: _____

Address: _____

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

Country: _____

Telephone: _____ Fax: _____

E-mail Address: _____

Company Web site: _____

Company Specialty (select primary specialty with #1 and secondary with #2):

Airline* Cargo Airline* Airline Products & Services Consultant Appraisal
 Leasing Insurance Legal Trader Broker Manufacturer Finance
 Maintenance Overhaul Services Computer Information Services

Members to be listed under the Corporate Membership:

You may list up to six (6) people

1. Name: _____ Job Title: _____
Company _____
Street Address: _____
City: _____ State/Province: _____ Postal Code: _____
Country: _____
Telephone: _____ Fax: _____
Email Address: _____

2. Name: _____ Job Title: _____
Company _____
Street Address: _____
City: _____ State/Province: _____ Postal Code: _____
Country: _____
Telephone: _____ Fax: _____
Email Address: _____

3. Name: _____ Job Title: _____
Company _____
Street Address: _____
City: _____ State/Province: _____ Postal Code: _____
Country: _____
Telephone: _____ Fax: _____
Email Address: _____

4. Name: _____ Job Title: _____

Company
Street Address:
City: State/Province: Postal Code:
Country:
Telephone: Fax:
Email Address:

5. Name: Job Title:
Company
Street Address:
City: State/Province: Postal Code:
Country:
Telephone: Fax:
Email Address:

6. Name: Job Title:
Company
Street Address:
City: State/Province: Postal Code:
Country:
Telephone: Fax:
Email Address:

Payment Methods:
Amount Due: \$1,750 USD for first six members
Add \$200 for each additional member

ISTAT is currently transitioning to calendar year dues. All new corporate membership will receive a paid through date of 31 December in the current year.

Check in USD payable to International Society of Transport Aircraft Trading
 Credit card: **MasterCard** **Visa** **American Express**

Credit Card #: _____ Expiration Date: __/__ (mm/yy)

Cardholder Name: _____

Cardholder Signature: _____

Bank Wiring Instructions: Please contact the ISTAT office for bank wiring instructions.

Submit application and fee to:
International Society of Transport Aircraft Trading
401 N. Michigan Avenue, Suite 2200
Chicago, IL 60611, USA
Telephone: 1.312.321.5169 ♦ Fax: 1.312.673.6579 ♦ email: istat@istat.org