



MEMBERSHIP APPLICATION



Please complete & Return to MGA/OEGA.
315 North Ken Avenue, Springfield, MO 65802 • Fax 417.831.3907

CONTACT INFORMATION

Company _____

Physical Address _____

City _____ State _____ Zip _____

Mailing Address { same as above } _____

City _____ State _____ Zip _____

Office Phone # _____ Fax # _____

Company Website _____

Main Contact _____ Title _____

Office Phone # _____ Ext. _____ Fax # _____ Mobile # _____

Email _____ Yes, I want to receive the MGA e-Line email alerts.

Please included the following individuals -

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

Name _____ Email _____

SEND ME INFORMATION ON THE FOLLOWING

- MGA Insurance Program
- Coupon Redemption Program

PAYMENT INFORMATION

- Check Enclosed
- Mastercard Visa

Card # _____

Expiration Date _____ CVV # _____

Name on Card _____

Signature _____

Billing Address _____

MEMBERSHIP CATEGORY INFORMATION

- Retailer Membership
_____ # of Store Locations
 - Supermarket \$175 per store capped at \$2,800
 - Convenience or Small Store (under \$1 Million)
\$125 per store capped at \$2,000
- Associate Membership \$500
- Wholesaler Membership
 - Under 100 Store Members \$1,000
 - Over 100 Store Members \$1,500

Your annual participation fee is based on the type of business you operate. Funds are for the operation of the Association and its mission. An Association financial statement is available to members upon request. Your determined fee is not a charitable contribution, however, may be deducted up to 75 percent as an ordinary and necessary business expense. The Association engages in state and federal lobbying on your behalf, this expense is not deductible.