



**OPASTCO**

## Membership Application – Individual

Name \_\_\_\_\_

Member Company You Were Affiliated With \_\_\_\_\_

Applicant's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail \_\_\_\_\_

**Lifetime Dues (One-Time Payment): \$500**

*Check payable to OPASTCO must accompany completed application.*

Tax laws require us to advise you that contributions or gifts to OPASTCO are not deductible as charitable contributions for federal income tax purposes. However, dues payments are deductible by OPASTCO members as an ordinary and necessary business expense.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**OPASTCO now takes credit card payments.**

[Fax credit card payments to: 202-659-4619; ATTN: Mark Levine]

Credit Card:  American Express  MasterCard  Visa

Name as it appears on card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Billing Address (if different from above): \_\_\_\_\_

\_\_\_\_\_

**Please make check payable to OPASTCO and mail to:**

**OPASTCO Membership  
Department 0524  
Washington, DC 20073-0524**

For more information about specific benefits of membership, please contact the OPASTCO Office, Membership Department, at 202/659-5990 or e-mail [membership@opastco.org](mailto:membership@opastco.org).