



Carolina Auto Recyclers Association Membership Application

Applicant Name _____

Company Name _____

Address _____

PO Box _____

City _____ State _____ Zip _____

Phone (_____) _____ Fax (_____) _____

Toll Free Number _____ E-mail _____

Web Site _____

Owner(s) Name(s) _____

Years in Business _____

Is the Dismantling/Recycling business the owner's chief source of income? Yes No

Membership Category: Dismantler/Recycler _____ Vendor/Supplier _____

Referred by _____

Dues - Dismantler/Recycler - \$200.00 per year (includes registration at the annual conference)

Vendor/Supplier - \$200.00 per year

Amount Due \$ _____ Check Enclosed Charge card

Credit Card Number _____

Expiration Date _____ CVV _____

Name on Card _____ Billing Zip Code _____

Complete and Mail to: CAR, 6118 Hwy 96 West, Youngsville, NC 27596

Questions – Call – 919-723-2263

Email-director@carolinaautorecyclers.com