



**North Alabama International Trade Association (NAITA)**  
**SUSTAINING MEMBER INFORMATION FORM**

The following information will be available to all NAITA members. Please return this form to the address/fax number below.

COMPANY NAME: \_\_\_\_\_

CONTACT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

INDUSTRY: \_\_\_\_\_

COMPANY DESCRIPTION: \_\_\_\_\_

WEBSITE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

ITEM(S) OFFERED FOR EXPORT (if applicable):

SIC CODE	ITEM DESCRIPTION
_____	_____
_____	_____
_____	_____

If Service Industry, please describe services offered:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC COUNTRY MARKET EXPERTISE  
\_\_\_\_\_  
\_\_\_\_\_

LANGUAGE CAPABILITIES  
\_\_\_\_\_

OTHER INTERNATIONAL EXPERTISE  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU IMPORT? \_\_\_\_\_ IF SO WHAT PRODUCTS? \_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN THIS FORM TO:**  
**NORTH ALABAMA INTERNATIONAL TRADE ASSOCIATION (NAITA)**  
**P.O. BOX 2457 • HUNTSVILLE, ALABAMA 35804 • Fax: 256.532.3704**

*Questions? Please contact Anne Burkett at 256.532.3505 or [naita@naita.org](mailto:naita@naita.org).*

# NAITA SUSTAINING MEMBER INFORMATION FORM

Organization: \_\_\_\_\_

The Sustaining Membership entitles your company to 25 members (5 voting) for \$1500.00. *The information you provide, including e-mail addresses, will be available in an online NAITA Membership Directory accessible to NAITA members only via password. Please let us know if you do not wish to be included in this directory.* Please list your company's representatives below, including contact information, and provide updated information as appropriate. This form may be duplicated for additional members up to 25 individuals. **The first 5 members listed will be voting members.**

## MEMBERS:

### Primary Contact

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

### Other NAITA Members: (Please give address if different from above)

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

### Information Provided By:

NAME \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_