



maryland staffing association

# MEMBERSHIP APPLICATION

Company: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Job Title: \_\_\_\_\_

Business Street: \_\_\_\_\_ Suite: \_\_\_\_\_

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

District:  Metro Baltimore  Eastern Shore  Western MD  Southern MD

Bus. Tele: \_\_\_\_\_ Ext: \_\_\_\_\_ Bus Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web Site: \_\_\_\_\_

➤ Membership [Check one]:  Staffing Company  Vendor Associate

➤ To be completed by Staffing Company:  Single Office  Multiple Office

Number of branch offices in Maryland  Please attach a list of each branch and a contact person.

Company type:  Independent  National  Regional

Staffing niche [Check all that apply]

- Accounting  Advertising  Banking  Communications
- Construction  Customer Service  Data Processing  Desktop Publishing
- Electronics  Environmental  Finance  Graphics
- Healthcare  Hospitality  Human Resources  Import/Export
- Industrial  Legal  Management  Manufacturing
- Marketing  Medical [clerical]  Multimedia  Office Support
- Purchasing  Real Estate  Retail  Sales
- Technical  Transportation/Distribution
- Other: \_\_\_\_\_

➤ To be completed by Vendor Associate:  
What product or service do you offer? \_\_\_\_\_

➤ Committee Interest [Check one.]  
 Legislative  Membership  Programs  Newsletter  SEW/PYI

➤ Is your company a member of the American Staffing Association [ASA]?  Yes  No

DUES: Staffing/Single Office - \$250.00 Staffing/Multiple Office - \$300.00 Vendor Associate - \$300.00  
*Make checks payable to "Maryland Staffing Association" and mail to the address at the bottom of this form.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For MSA internal use only:  
P.R. # \_\_\_\_\_